

THE

(8)

TWENTIETH ANNUAL REPORT

OF THE

OFFICERS

OF THE

RETREAT FOR THE INSANE,

AT

HARTFORD.

HARTFORD.

CASE, TIFFANY & BURNHAM, PRINTERS,

Pearl-street, corner of Trumbull.

1844.

8)

OFFICERS
OF THE
RETREAT FOR THE INSANE,

For 1844.

RT. REV. THOMAS C. BROWNELL, *President.*
DAVID WATKINSON, *Vice President.*
WILLIAM T. LEE, *Treasurer.*
A. M. COLLINS, *Auditor.*
CHARLES SHELDON, *Secretary.*

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SAMUEL TUDOR,
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HENRY L. ELLSWORTH,
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*GEORGE SMITH,
*ASAHEL HATHAWAY, JR.
*NEHEMIAH HUBBARD,
*ABIGAIL HUBBARD,
*OBADIAH BROWN.

* Deceased.

Directors chosen at the Annual Meeting.

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 JOSEPH TRUMBULL,
 GEORGE SUMNER,
 JOHN BUTLER,
 THOMAS H. GALLAUDET,
 CHARLES SHELDON,
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 ARCHIBALD WELCH, M. D.

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Mrs. T. C. BROWNELL,
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 Mrs. R. WATKINSON,


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 Mrs. W. W. ELLSWORTH,
 Mrs. JOHN BUTLER.

JOHN S. BUTLER, M. D. *Physician and Superintendent.*
 REV. THOMAS H. GALLAUDET, *Chaplain.*
 DANIEL BROOKS, *Apothecary.*
 MR. VIRGIL CORNISH, *Steward.*
 Mrs. M. H. CORNISH. *Matron.*

NOTE.

The annexed Reports of the Physician and other Officers of the Retreat, present a satisfactory view of its operations the past year. In consequence of the increased demand for the admission of patients, it has been found necessary to enlarge the present accommodations. The building of two wings, sufficiently large to accommodate eighty patients, has been recently commenced, and it is confidently hoped they will be completed as early as May or June, 1845.

The Directors of the Retreat have reduced the charge for board and attendance, fifty cents per week.



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ABSTRACT OF EXPENSES ON ACCOUNT OF THE RETREAT, FROM
MAY 1, 1843, TO MAY 1, 1844.

Meat and fish,	\$1,500 83
Bread Stuffs,	816 02½
Wood, coal, and lights,	965 32
Butter and cheese,	914 76½
Groceries, fruit, eggs and milk,	1219 75½
Furniture and bedding,	562 31
Repairs and improvements,	1200 19
Clothing for patients, to be repaid,	1318 07
Wine, 97.25—medicines, 628.28	725 53
Hay, feed, straw and vegetables,	334 58
Wages of attendants, domestics and farm labor,	3734 16½
Cash refunded to patients,	161 39
Expenses of nominating Committee,	45 00
Salaries,	3440 33
Rent of Superintendent's house,	180 00
Printing, 58.85—library, 90.39	149 24
Insurance,	60 00
Incidental expenses,	231 05¼
	<hr/>
	\$17,558 55¼
Amount of orders drawn by the Chairman of the board of Managers, on the Treasurer,	17,438 71
Balance due the Steward, April 30, 1844,	119 84¼
	<hr/>
	\$17,558 55¼

THE TREASURER'S ACCOUNT.

Dr. *Retreat for the Insane, in account with William T. Lee, Treasurer.* Cr.

1843. July 19.	To cash paid J. Gilman, for land, " counterfeit bill, " postages, quit claim deed, and record- ing deeds, " cash loaned, " cash paid orders of J. H. Wells, Chair- man of Managers, " balance to new account,	\$720 00 5 00 1 35 3,000 00 17,430 71 6,321 39 <u>\$27,478 45</u>	1843. May 1. June 28. 1844. April 26.	By balance from old account, " cash received of H. Barnard, 2d., part salary of Chaplain, " cash received in payment of principal on loans, " cash received of estate of Israel Munson, " cash for interest, " cash received for support of patients,	886 78 250 00 1,450 00 5,000 00 1,526 68 18,364 99 <u>\$27,478 45</u>
1844, April 30.	Hartford, May 8, 1844.—Examined the above account, and find it correct. JAMES WARD, Auditor.		1844. May 1.	By balance on hand from old account, Hartford, May 1st, 1844. WILLIAM T. LEE, Treasurer.	\$6,321 39

THE
TWENTIETH ANNUAL REPORT,
OF THE
PHYSICIAN AND SUPERINTENDENT
OF THE
RETREAT FOR THE INSANE,

For the year ending March 31, 1844.

IN conformity with the by-laws, the Superintendent of the Connecticut Retreat for the Insane, presents to the Board of Directors the Twentieth Annual Report.

It will be remembered that the Institution came under his superintendence in the month of June last. The Report, however, embraces the history of the progress and results of the year. These results are such, it is believed, as to satisfy its friends and the community, that for another year it has continued to fulfil the great objects for which it was founded, and to carry out the wise and philanthropic intentions of its benevolent patrons, proving itself worthy of those tokens of public approbation and private munificence, with which its course has been signalized. It has truly afforded to a large number of those who were suffering from a visitation, in the providence of God, of the most severe of all diseases, a safe and pleasant retreat from the injudicious management, the insufficient arrangements, and the narrow means of home, to that suitableness of accommodation, that kindly and considerate oversight, and that systematic moral and medical treatment, best calculated to restore health to the curable, and to afford relief and comfort to others; rendering to all, those kind offices which may be appreciated by the grateful heart when the cause of their exercise cannot be discerned by the disordered intellect.

At the beginning of the year, the number of patients at the Retreat, was

	Total.	Male.	Female.
	89	46	43
Admitted during the year, - - -	80	51	29
Total number during the year, - -	169	97	72
Discharged, recovered, - - . -	44	26	18
“ much improved, - - -	10	6	4
“ improved, - - -	16	11	5
“ not improved, - - -	7	2	5
“ Died, - - -	9	5	4
	86	50	36
Remaining at the Retreat, - - -	83	47	36

The whole number of patients in the Retreat during the year, has been one hundred and sixty-nine; of whom eighty-six have been discharged, and eighty-three remain. Of those discharged, forty-four have recovered, and have returned to their homes and friends, to receive, as one expressed it, “the joyful welcome awaiting them from all,” and to resume their social relations; ten have been discharged “much improved”; and sixteen improved. In many of these, the progress of improvement gave me confident assurance, that a few weeks longer continuance of the treatment which had been so far successful, would have restored them to perfect health. By removal they have incurred the danger of a return of the disease in a more aggravated form, and under circumstances of prolonged continuance and of repeated disappointment, which must seriously diminish the chances of recovery.

The evils of too early removal of patients from the benign and healing influences of the institution, are not properly appreciated. It is well known to all who have had opportunity of observation, that many of the insane who are frantic, noisy and dangerous, while under the care of their friends, on admission to our wards become at once calm, docile and friendly. This change of deportment does not indicate the cessation, nor even in some instances, the mitigation of disease; but its control, by the various influences brought to bear upon it. Many patients who are

now quiet and contented inmates of our family, cheerfully laboring or joining in amusements and recreations, or perhaps rambling at will over our grounds and about the neighboring country, would become aroused at once on a return to the exciting scenes and diseased associations of their former residence. It would be far happier for the insane if their friends would reason as correctly in this as in other diseases. The re-union of the fractured bone does not authorize the immediate removal of the splints and bandages, nor the free use of the limb: the crisis of an attack of fever or inflammation, does not justify the instant omission of remedies, the neglect of the precautionary treatment of convalescence, the unguarded indulgence of appetite, nor the dismissal of professional oversight and advice. Now the brain is amenable to the same natural laws as other parts of the human frame, and insanity is neither a demoniacal possession, nor an abstract excitement of the intellect; but it is as truly a physical disease as fever or rheumatism, requiring the same consideration, and as curable.

The records of the Retreat present some melancholy evidences in the history of returned and incurable cases, of the evils resulting from violations of these self-evident propositions. Our sympathies have been deeply excited at times by the removal of patients under such circumstances, from the inability of their friends to support them any longer at the Institution; and though aware that in all probability their removal would entail permanent insanity as its consequence, they had no means of escape from the dreadful alternative, the provision made by the State having been exhausted. The only consolation they could apply to themselves in the prospect of the trials and difficulties before them, was, that when all their means were exhausted, "the town would be obliged to take care of the patient."

It appears to me a question worthy of serious legislative consideration, how far it may be wise, by thus withholding sufficient and timely relief, to entail upon the public charge the most hopeless and expensive burden of pauperism—the incurable insane. I rejoice in the indications which public sentiment is giving on every side, that more wise and humane counsels are prevailing,

that a spirit is abroad in the State which will break from the public mind the fetters of a false policy, and nobly illustrate the far-sighted wisdom of its economy, and the depth and sincerity of its humanity, by furnishing sufficient provision for the restoration or relief of all its insane poor.

A singular misconception of the probable time required for the restoration of patients, has grown out of one of our by-laws, which requires payment in advance for the expense of the first quarter, the probable recovery and return of the patient being often connected with the expiration of that period ; the enquiry frequently being made "if their time is nearly up." Nothing can be more erroneous than the supposition of any connection between the one period and the other. The frequency of this injurious error both in the minds of patients and friends, induces me to notice it here. A residence of three months is rarely sufficient to effect a cure. In strictly recent cases, many recoveries take place within four months, but ordinarily the friends of patients should bring them with the intention of allowing them to remain at least six months unless restored previously, nor should they despair of a case which has not been under treatment at least one year, as many recover after much longer duration.

The results of the early commitment of cases of insanity to the curative appliances of this and similar institutions, present a most convincing evidence of its good policy as well as of its humanity. They justify us in expecting that of cases where the duration of disease has been less than one year, from eighty to ninety per cent. will recover ; where it has existed from one to five years, from twenty to thirty per cent.; from five to ten years, about twelve per cent.; and where of longer duration, not more than five per cent. Delay in applying the appropriate treatment rapidly diminishes the chances of recovery. Changes take place in the delicate organization of the brain and nervous system, under the continued action of disease, which soon become permanent and irremediable. . It is to this we owe a large proportion of that incurable insanity which is alike a source of sorrow and anxiety to the friends, and a burthen to the resources of the State.

The health of our family has been generally good. Cases of even temporary indisposition have been rare, with the exception that during the months of November and December, we were visited, in common with the community around us, with the influenza. Nearly one half of our family were affected by it, the greater part of them slightly, but in some of our more aged and debilitated patients it was severe and protracted. In combination with pneumonia, &c. it proved fatal to three, previously exhausted by long continued disease. In a very aged and infirm patient, death occurred from fracture of the thigh bone, caused by a fall upon the floor as she was passing across the hall. Two deaths were from severe injuries accidentally received immediately previous to admission; one from exhaustion, (the result of fatigue from travelling a considerable distance to the Retreat in the last stages of typhoid fever!) occurred a few hours after admission; one from epilepsy; and one from suicide, under circumstances which the most rigid supervision could hardly be expected to control. In four of the preceding cases, the causes of death were induced previous to admission, and were of a character which required of us little else than to watch over their last moments.

Our garden, under the good husbandry of the Steward, Mr. Cornish, has maintained its reputation for luxuriant productiveness. It has furnished our family with a most abundant supply of the various vegetables in their season, through the summer and for winter use. Several premiums were awarded to its productions at the Fair of the Hartford County Agricultural Society.

A highly cultivated and productive garden is an important appendage to every Lunatic Asylum, yielding the more healthy articles of diet, and presenting an inviting occupation, peculiarly well adapted to the general physical ability of the patients, in which the majority, whatever may have been their previous pursuits, may be induced to engage.

In all the departments of our household, I aim to mark idleness disreputable and injurious, and profitable occupation not only honorable and popular, but the surest means of recovery from disease, and of giving permanency and enjoyment to health. Inculcating the truth of that natural law which makes occupation

of some kind essential to the possession of health and happiness, my great object is to withdraw the mind from reflecting upon the delusions of disease, or upon the real sorrows and anxieties which are often times their natural consequence, to light up the darkness within, and to induce the hope of brighter and happier days. "Any active employment must induce a certain degree of mental attention," remove the irksomeness of confinement, allay mental inquietude, induce regular habits, excite interest, and thus arouse the dormant or wayward energies of the mind to consistent and vigorous action. Labor, even of a light description, is not however adapted to all: with most it is the continuance of established habits, fortunately essential now to their well being and comfort; for so long as the natural laws of our system, in regard to air, exercise, diet, &c. continue to be violated by others, so long will those who earn their bread by the sweat of their brow, have the reward of prolonged life, an increase of physical vigor, and of the probabilities of recovery from disease. Amusements and recreations, which gratify others, appear uninteresting to them, and they turn with cheerfulness to those avocations which lead directly to some beneficial result. On the other hand, those whose habits and pursuits have given them a distaste to labor, or who do not possess the requisite physical ability, seek occupation and diversion of mind in reading or social intercourse, or the varied amusements or more active recreations which are provided for them. It is to these means, during the winter and the inclement portions of the other seasons, that we are to look for relief from that monotony and weariness which would otherwise cast a baleful influence over our halls, and render nugatory all our other remedial measures.

My aim in these varied diversions, is to induce cheerfulness and inspire hope among the patients—and as they observe the effects upon the minds of others—see the melancholy of one and the excitability of another yielding to their influence, they are led to cherish in their heart the conviction that the hour of their deliverance from disease and restraint, and of reunion to society and friends may not be far distant.

Many of the insane, amid the greatest absurdities and extrav-

agencies of thought and action, are exceedingly close and shrewd observers of the motives of those around them; unquestionably more so under the more excited and partial action of the brain, than when in health. Any deception therefore, or attempt to amuse them as children of a larger growth, would with all but the demented, show the fallacy of our pretensions, and prove an utter failure. We present, therefore, entertainment in which the best and wisest may at times indulge, or to which all may profitably resort, to while away the tedium of convalescence from this or any other disease. We do not limit them to the patients; all of our family, the resident officers of the Institution, the attendants, &c. participate in them. Our children too mingle in the dance, and take their parts in the concert. Many touching and amusing incidents might be related of the effects thus wrought upon their minds. The sewing circle, the reading and musical parties, have been continued on the Monday and Wednesday afternoons of each week, under the direction of the Matron, who, excellent every where, exerts here, from her cheerfulness of manner and kindness of heart, the happiest influence. These parties have met in the parlors connected with the female wing, except during the pleasant afternoons of summer, when by common consent they have been held upon the lawn. Here our female patients form groups beneath the shade, some sewing or knitting, others listening to an interesting story, or socially conversing—the attendant and the patient, the sane and the insane, mingling together, hardly to be distinguished, and oftentimes, to the amusement of all, mistaken for each other by the stranger. Such a scene looks very unlike the condition of the insane in those days when, in the language of a quaint old Scotch writer, “we committed the better sort of the mad people to the care and taming of surgeons. and the inferior to the scourge.” An hour previous to evening prayer, on every pleasant afternoon in the summer and autumn, our female patients, oftentimes with scarcely an exception, have joined us in a ramble about our garden and grounds, for the tasteful planning and ornamenting of which, we are so much indebted to the benevolent foresight of some of the founders of the Institution.

Our too few festival days were suitably remembered; that of our National Independence by a rural party upon the lawn, where tables, tastefully arranged and ornamented, were liberally supplied with cakes, fruit and lemonade. The Declaration of Independence was read by one of the patients, and toasts were given. Thanksgiving and "Merrie Christmas," with their hallowed old-time associations, were suitably remembered. The cordial greetings of the New Year were gratefully reciprocated. This anniversary, and that of the twenty-second of February, were duly celebrated with dancing-parties, &c. A party of the patients, under the direction of the Assistant Physician, have given several concerts, during the winter, of vocal and instrumental music. Some of the most excitable members of our family have been present on these occasions. The quiet and fixed attention of all, and the expressions of gratification and delight upon every countenance, were indicative alike of the happy influence of music, and of their capacity for enjoying it. Dancing is a favorite amusement, and our dancing parties have been numerously attended. At all these parties we have seen patients conducting themselves with entire propriety, who both before and afterwards, were among the most noisy and ungovernable. As a general rule, all sleep more quietly after them, and disturbance of any kind is more rare than ever. A carriage, with a pair of horses, is appropriated exclusively to the use of the patients, who ride out every pleasant day at all seasons.

Backgammon, draughts, dominoes, solitaire, games, Dr. Busby, battledoor, and other games, portfolios of prints, books, newspapers, &c. &c. are in constant requisition. During the milder seasons, our male patients, when not otherwise employed, roll at ten-pins, pitch quoits, play at ball, &c. Our riding and walking parties go out every pleasant day.

Many of our male patients, some with an attendant and others without, have attended the military reviews, the agricultural show and fair, the public concerts, the lectures of the Young Men's Institute, and of the Historical Society, and divine service in the forenoon of the Sabbath, in the various places of public worship in the city. They have also visited the Asylum for the Deaf and

Dumb, the State Prison at Wethersfield, and the various green-houses in the vicinity. During the pleasant days of summer, our male halls are nearly deserted—their inmates are abroad in every direction, many with no other security for their return than their pledge of honor, which is very rarely violated.

Our Library has had an extensive circulation, and has been an invaluable source of interest and improvement. It has been obtained during the year, principally by a judicious appropriation of the Board of Directors, and now consists of two hundred and fifty volumes of carefully selected books.

The extensive collection of prints, (for which we are indebted to the liberality of the Hon. Daniel Wadsworth, and other friends in the city) with their diversity of character and scene, "from grave to gay, from lively to severe," have charmed away many a weary and melancholy hour.

It is only in Lunatic Hospitals that the course of treatment indicated by an intelligent consideration of the different phases of insanity, can be applied. No where else can the varied forms of occupation, recreation, and amusement, be so successfully carried out; no where else, can the same amount of indulgence be safely granted. It is here alone that beneficial results can be reasonably expected. Elsewhere the consequences will vary with the character of the cases. Generally one of two results ensues—the mind, left to itself, dwells with increasing intensity upon the diseased train of thought, until excitement, growing by its own indulgence, overcomes the vestiges of reason, and the sufferer becomes an ungovernable maniac; or weakened by the shock which disease has inflicted upon the system, gradually loses its power, and sinks into a state of torpidity or childishness. This tendency to mania or dementia, the aggravated extremes of disease, we find illustrated whenever the insane poor of any community are not provided for in a suitable hospital, but are left to the tender mercies of jails and alms-houses, of cages and dungeons, of bonds and fetters. The expositions which have been lately made, of the suffering condition of the pauper insane, in the jails and alms-houses of Massachusetts, and the County houses of New York, when considered in connection with the energetic

philanthropy, and the diligent benevolence of those States, may lead us to fear that a similar investigation would disclose an equally deplorable state of things in Connecticut. Developments occasionally reach us, which would justify the strongest apprehensions of such results.

The religious services of the Sabbath, and of daily evening prayer, have been regularly continued by our estimable Chaplain, Rev. Mr. Gallaudet. More extended experience and observation have confirmed the sentiment which I have elsewhere advanced, in relation to the beneficial influence of religious worship; that, leaving out of the estimate all other results, a high rank must be assigned to it as a remedial measure. But its influence may not be thus limited. Amid the vestiges of reason, the affections and the sensibilities exist as warmly and as acute as ever, and in many cases the same high and ennobling results may be attained, as from the operation of similar causes upon individuals under ordinary circumstances. Dr. Poole, the intelligent Superintendent of the Montrose Asylum, says, "after the obliteration of reason, many of the highest feelings of our nature remain, to which a successful appeal may be made; and those by which we are connected with a higher sphere of existence, admit as readily of being awakened on the proper object being presented to them, as the ordinary passions under which the lunatic acts. Their influence is in the highest degree consoling, and congenial to the return of mental strength and serenity; the effects in each individual are probably as different as in the members of an ordinary congregation." The judicious application of these means, (upon which their efficiency peculiarly depends) requires that they be made, as in the Retreat, in consistency with the general course of discipline and treatment which the medical officer has been led to adopt. Having for a long time been deeply impressed with a sense of the duty and importance of providing for the religious instruction of the insane, it is gratifying to witness the extending prevalence of similar sentiments. The claims of the lunatic, that he shall no longer be excluded from the privilege of worshiping God, are being widely recognized. In all the leading Institutions in this country, and in the Retreat among the

first, arrangements have been made for the due and customary observance of the Sabbath, either by the appointment of a Chaplain, or by the aid of the neighboring clergymen. In most, suitable Chapel accommodations are provided, to add force and dignity to the service. The same is true of many of the Hospitals in Great Britain and on the Continent.*

Thus, one by one, are the errors and delusions relative to insanity passing away ; the enlightened reason and the sympathy

* The celebrated Dr. Jacobi, in his description of the Institution at Siegburg remarks :—

“ My own experience, and that of many German as well as English physicians, who have devoted themselves to the subject of insanity, authorizes me to declare, that no man has any right to question the existence, in the minds of the great majority of lunatics, of a susceptibility to religion, and of a feeling of need to be frequently occupied with its subjects, and engaged in its practices ; that it is important and of an unequivocally beneficial influence, not to allow the impression of true piety to become extinguished in the minds of these patients, but on the contrary, to seize hold of even the faintest traces of religion, and to convert them, as much as possible, into agents in their recovery ; that impressions made upon the religious consciousness of insane persons, and particularly of those who are in a convalescent state, may be made available as a powerful means of inducing them, on re-entering into their former social relations, to avoid those moral deviations which have been instrumental in bringing on their derangement ; and that when the means of preaching, of general worship, of the communion, and the singing of spiritual songs, in company with the organ, &c., are wisely employed for this end by skillful men, with the proper exclusion of all individuals who are either totally unable or unfit to participate in such ceremonies, they neither threaten, nor, according to our hitherto experience, have ever been known to occasion any injurious consequences. On the contrary, it has been invariably found, in all those Lunatic Asylums where a regular system of divine service has been introduced, that its general effects upon the minds of the patients, and even of those who may be anything but keenly sensible to religious impressions, are of a tranquilizing and alleviating character ; though these effects may be solely owing, in many cases, to a vague revival of obscure coincidences with their former habits of thought and life.

“ In accordance with these views, then, our establishment is provided with everything pertaining to the encouragement, support, and promotion of religious feeling, and to the ordinances of religion ; with a spacious and well-arranged Chapel, with all the appurtenances of the church service ; and a sufficient number of copies of the Holy Scriptures, and other carefully selected works on religious subjects. At the head of these are not wanting conscientious and pious ministers, who, animated themselves with the spirit of Christianity, possess also the gifts of kindling and cherishing the dormant sparks of religious feeling.”

of their fellow men are opening the prison-doors of the lunatic, striking off his fetters, and restoring the rights and dignity of humanity. They are giving back to him the Sabbath day, that all the calm and soothing influences of that holy time may rest upon his heart.

Our grateful acknowledgments are due to the Chaplain, for the assistance we have derived in the moral treatment of the patients, from his daily ministrations. The sublime truths of revelation have been presented by him, in a manner so judicious, and their application to the every day duties and trials of life so happily enforced and illustrated, that without exciting the most sensitive, he has afforded instruction and consolation to all.

I desire also to express my obligations to Dr. Brooks, Mr. Cornish, and Mrs. Cornish, for the aid which they have rendered me in the management of the Institution, by the faithful, earnest, and devoted manner in which they have discharged the duties of their respective departments.

In addition to this, much commendation is due to the male and female attendants, and to all others concerned in the care of the patients.

We have received during the year, many gratifying tokens of the kind interest felt by the community, in promoting the comfort and enjoyment of those under our charge. We have already noticed the donation of a large collection of prints and engravings, some of the most valuable of which have been framed, and now ornament different apartments of the house. Their frames, which are very neat and appropriate, were finished and presented to us by Messrs. George Burnham & Co.

The Journal of Commerce, Olive Branch, Baptist Advocate, Courant, and New Haven Palladium, have been sent to us regularly. To Mr. Cornelius Wildman, of New Haven, we have been frequently indebted for periodicals, and parcels of foreign and other newspapers; and to others of our friends for books, periodicals, maps, &c.

Our thanks are due to the Historical Society, and to the Young Men's Institute, for a sufficient number of free tickets to their re-

spective courses of Lectures, to accommodate such of our patients as would be benefited by their use.

May that kind Providence which has hitherto watched over this Institution, and marked its progress with such signal success, continue to smile upon it. In humble reliance upon Divine assistance, and with a deep consciousness of the responsibilities which I have assumed, I pledge to its best interests my most earnest efforts.

Respectfully submitted,

JOHN S. BUTLER.

Retreat for the Insane, Hartford, May, 1844.

APPENDIX.

TABLE II.

SHOWING THE NUMBER OF ADMISSIONS, RECOVERIES, AND DEATHS,
ANNUALLY, FROM THE OPENING OF THE RETREAT,
APRIL 1st, 1824.

		Total Number Admissions.	Total Number Recoveries.	Total Number Deaths.
Admitted	1824-5	44	10	1
"	1825-6	33	16	1
"	1826-7	37	24	0
"	1827-8	40	27	4
"	1828-9	42	26	2
"	1829-30	51	28	0
"	1830-1	53	32	1
"	1831-2	80	46	6
"	1832-3	68	37	4
"	1833-4	72	43	3
"	1834-5	72	36	6
"	1835-6	73	42	6
"	1836-7	91	55	6
"	1837-8	67	42	10
"	1838-9	94	49	8
"	1839-40	84	50	2
"	1840-1	67	38	9
"	1841-2	96	56	8
"	1842-3	83	45	6
"	1843-4	80	44	9
		1327	746	92

TABLE III.—MONTHLY ADMISSION OF PATIENTS.

M. *Males.* F. *Females.*

YEAR.	April.		May.		June.		July.		Aug.		Sept.		Oct.		Nov.		Dec.		Jan.		Feb.		Mar.		Total.	Male.	Female.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
1824	5	2	5	3	3	1	0	6	4	1	2	1	3	0	2	1	0	1	1	1	2	2	3	1	44	31	13
1825	2	0	0	3	0	3	1	3	4	1	0	2	0	2	1	0	1	1	2	3	1	1	2	1	34	14	20
1826	0	1	4	2	2	1	2	2	2	1	2	2	2	2	1	0	0	1	3	1	2	2	1	0	36	23	13
1827	1	0	0	0	0	1	1	1	1	4	2	5	2	2	1	1	0	3	0	3	0	0	3	3	40	18	22
1828	2	1	4	4	1	3	2	3	5	1	2	2	1	2	2	1	0	1	0	1	1	0	3	0	42	23	19
1829	2	2	4	2	2	3	3	4	2	3	2	2	0	2	2	1	3	3	2	1	2	4	2	2	52	25	27
1830	2	2	1	2	2	3	2	4	3	1	3	3	0	3	2	3	2	2	0	1	4	4	2	2	53	24	29
1831	2	3	5	4	4	6	4	7	1	4	7	2	3	3	3	0	3	1	4	3	0	6	4	3	61	36	45
1832	4	4	3	0	7	2	5	4	4	3	2	6	2	3	4	2	2	2	1	3	2	0	4	2	67	37	30
1833	4	1	0	3	0	5	2	1	8	3	3	3	5	3	2	3	4	4	0	5	4	1	3	4	72	46	26
1834	1	3	4	6	3	4	7	5	2	3	0	11	3	3	3	2	4	4	6	1	2	0	1	2	73	26	47
1835	1	2	5	6	4	3	2	1	7	4	3	4	4	2	2	4	3	3	1	5	5	1	1	0	91	42	49
1836	1	5	6	4	4	2	5	7	0	7	2	4	2	2	2	4	4	2	6	3	5	2	2	1	67	37	30
1837	2	3	2	4	4	8	3	1	4	3	4	2	4	2	3	2	5	6	3	2	1	0	3	3	94	51	43
1838	4	4	8	3	4	8	8	6	4	1	3	7	4	5	1	4	2	6	2	2	2	1	2	2	83	42	41
1839	2	2	6	4	6	1	3	3	3	3	3	3	5	2	3	4	2	1	6	3	2	4	2	2	67	36	31
1840	4	1	8	1	3	8	1	5	3	4	4	3	2	3	1	2	7	4	2	6	2	2	4	0	96	45	51
1841	2	5	6	4	7	2	4	4	4	12	4	3	3	3	3	3	1	4	3	2	2	3	3	0	63	50	33
1842	3	5	1	3	4	8	2	1	4	7	6	2	3	3	7	1	4	4	2	3	3	4	0	3	51	29	
1843	2	6	4	3	6	3	6	2	6	5	4	2	4	4	6	1	4	4	3	3	4	4	3	3	69	2	
Total.	46	52	70	61	73	73	66	59	66	76	58	68	55	46	53	40	56	39	49	49	47	31	53	35	1327	692	635

TABLE IV.—PLACE OF RESIDENCE.

Connecticut, - - -	898	District of Columbia, - - -	4
New York, - - -	173	North Carolina, - - -	3
Massachusetts, - - -	106	Georgia, - - -	4
Vermont, - - -	33	Alabama, - - -	2
Rhode Island, - - -	23	Upper Canada, - - -	2
New Hampshire, - - -	10	Maine, - - -	1
West Indies, - - -	11	Louisiana, - - -	1
Pennsylvania, - - -	9	United States Navy, - - -	1
Maryland, - - -	8	Osage Indian, - - -	1
Lower Canada, - - -	8	Ireland, - - -	1
Virginia, - - -	6	Scotland, - - -	1
Ohio, - - -	5	Unknown, - - -	4
New Jersey, - - -	7		
		Total, -	1327

TABLE V.—AGES OF PATIENTS REMAINING IN THE RETREAT, MARCH 31, 1844.

Under 20 years,	1	From 50 to 55 years,	9
From 20 to 25 years,	8	“ 55 to 60 “	4
“ 25 to 30 “	14	“ 60 to 65 “	4
“ 30 to 35 “	13	“ 65 to 70 “	2
“ 35 to 40 “	9	“ 70 to 75 “	1
“ 40 to 45 “	7		
“ 45 to 50 “	11	Total,	83

TABLE VI.—DURATION OF INSANITY WITH THOSE REMAINING MARCH 31, 1844.

Less than 1 year,	14	From 20 to 25 years,	2
From 1 to 2 years,	8	“ 25 to 30 “	2
“ 2 to 5 “	14	Over 30 years,	4
“ 5 to 10 “	7	Unknown,	10
“ 10 to 15 “	11		
“ 15 to 20 “	11	Total,	83

TABLE VII.—OCCUPATION OF PATIENTS.

MALES.

Farmers, - - - - 27	Painters, - - - - 2
Merchants, - - - - 12	Hatters, - - - - 2
Students, - - - - 9	Silversmith, - - - - 1
Clerks, - - - - 5	Seamen, - - - - 2
Shoemakers, - - - - 4	Butchers, - - - - 3
Weaver, - - - - 1	Iron Founder, - - - - 1
Physicians, - - - - 2	Officer, - - - - 1
Joiner, - - - - 1	Clergyman, - - - - 1
Laborer, - - - - 1	Chairmaker, - - - - 1
Wheelwrights, - - - - 2	Stone Mason, - - - - 1
Tinner, - - - - 1	Peddler, - - - - 1
Saddler, - - - - 1	Rigger, - - - - 1
Carriage Maker, - - - - 1	Cooper, - - - - 1
Blacksmiths, - - - - 2	Unknown, - - - - 8
Tailors, - - - - 2	—97

FEMALES.

Females not accustomed to labor, - - - - 10
“ accustomed to sedentary employments, - - - 6
“ “ “ active employments, - - - 33
“ not classified, - - - - 23
—72
Total, - - - 169

TABLE VIII.—PROBABLE CAUSES OF INSANITY.

Hereditary, - - - - 221	Injury to the Head, - - - 14
Ill Health, - - - - 174	Disease of the Brain, - - 11
Religious Anxiety, - - - 113	Jealousy, - - - - 6
Intemperance, - - - - 104	Malformation of the Brain, 3
Intense Mental Exertion, 94	Change of Habits, - - - 4
Domestic Trouble, - - - 69	Apoplexy, - - - - 2
Loss of Friends, - - - 65	Paralysis, - - - - 4
Puerperal, - - - - 45	Fright, - - - - 3
Disappointed Affection, - 26	Bodily Injury, - - - - 2
Masturbation, - - - - 20	Exposure to fumes of Charcoal, 1
Exposure and Fatigue, - 17	Millerism,, - - - - 6
Epilepsy, - - - - 14	Uncertain, - - - - 281
Repelled Cutaneous Disease, 15	
Disappointed Ambition, - 10	Total, 1327

TABLE IX.—CIVIL CONDITION.

MALES.				FEMALES.			
Married,	-	-	33	Married,	-	-	22
Widowers,	-	-	3	Widows,	-	-	12
Single,	-	-	61	Single,	-	-	38
Total,			97	Total,			72

TABLE X.

Showing the comparative expense of supporting old and recent cases of Insanity, from which we learn the economy of placing patients in Institutions in the early periods of disease.

In this Institution, in 1843, twenty old cases had cost,	44,782 00
Average cost of old cases,	2,239 10
Whole expense of twenty recent cases, till recovered,	1,308 30
Average cost of recent cases,	65 41

In the Massachusetts State Lunatic Asylum, in 1843, twenty-five old cases had cost,	54,157 00
Average expense of old cases,	2,166 28
Whole expense of twenty-five recent cases, till recovered,	1,461 30
Average expense of recent cases,	58 45

In the Ohio Lunatic Asylum, in 1843, twenty-five old cases had cost,	35,464 00
Average expense of old cases,	1,418 56
Whole expense of twenty-five recent cases,	1,608 00
Average expense of recent cases,	64 32

In the Maine Lunatic Hospital, in 1842, twelve old cases had cost,	25,300 00
Average expense of old cases,	2,108 33
Whole expense of twelve recent cases,	426 00
Average expense of recent cases,	35 50

In the Hospital at Staunton, Va. twenty old cases had cost,	41,633 00
Average expense of old cases,	2,081 65
Whole expense of twenty recent cases,	1,265 00
Average expense of recent cases,	63 25

Dr. Woodward, of the Massachusetts State Lunatic Hospital remarks, "that it cannot be doubted, that at least one-half of all the lunatics whose support must now continue to be a burden upon the State while they live, might have been restored, and this half might have added as much to the resources of the State as the other half have subtracted from it."

If eighty per cent. of all recent cases be restored to health, at least ten per cent. will be so much improved, as to require no especial supervision: and when the effects of fatal disease are taken into account, we have but five to eight per cent. left to be provided for permanently in Hospitals. No one can doubt but that a large per centage of the recent cases under present arrangements, are every year becoming incurable. The number of incurables no longer receiving this large addition, would speedily diminish under the operation of natural causes, and thus soon cease to tax the resources of the State, and to crowd the wards of our Hospitals.

REPORT OF THE CHAPLAIN.

NEARLY six years have elapsed since my connection, as Chaplain, with the Retreat. This connection has been to me one of deep interest. It has afforded me the opportunity of becoming personally, and, in not a few instances, familiarly acquainted with its numerous inmates, and of studying the peculiarities of their mental and moral characteristics.

The manner in which insanity manifests itself, is exceedingly various. Its origin is often far back in the history of the individuals who labor under it, and its workings gradual and obscure. Its influence over the reason, the conscience, the affections, and the will, admits of many degrees both of power and of intermission; so that sometimes, for longer or shorter intervals, these faculties are apparently left in their natural and sane state. At the same time, the truths that can be advantageously addressed to those who are thus affected, and the motives to aid in leading them back to a self-controlling and healthful condition of mind, with the consolations that will reach their real or supposed trials, need to be so wisely selected and applied, that no department, perhaps, of human skill or benevolence, demands greater caution, deliberation, and experience.

In view of these things, I have endeavored, while performing the duties assigned me, to feel my way along, always aiming to act in accordance with the counsels and directions of the Superintending Physician, and getting light, also, from the other Officers of the Institution, so as, in some good degree, and according to the best of my ability and judgment, to carry into effect the benevolent design of the Directors in appointing me to fill so responsible a station. And it is cause of devout gratitude to God, that these labors, as I am encouraged to believe, have been attended with considerable and promising success. It is no small part of such

encouragement to be assured of this, as has often been the case, by the Officers of the Institution, by the patients themselves, especially when convalescent, by their friends, and by others who have had the opportunity of witnessing the results of my efforts.

If good, however, has been done, the Chaplain has been but the humble instrument, used by a higher Power, of accomplishing it. *Divine Truth*, in its various moral and religious aspects, as derived from the Word of God, and accompanied by the influence of his Spirit, and his Providence, has been the great source of efficacy in the means employed. And it is most cheering to find, that this Truth is adapted to the peculiar condition of those who most need the pure and peacefully-controlling motives, and the sustaining and hope-inspiring consolations which it affords.

No careful observer who notices the influence of this Truth, wisely and kindly presented, whether in the assembly of the inmates of the Retreat for social and public worship, or in the more private and personal intercourse which the Chaplain has with them, can doubt, for a moment, its benign effects. Evidence of such effects has been accumulating year after year, not only at this, but at all the other Institutions, in our own country and in Europe, where the experiment has been tried. Thus far the whole amount of testimony is in its favor. And it is just what we should be led to expect from the nature of the human mind, and the character and design of that Revelation which its divine Author has given to us, to minister to our spiritual necessities in this world ; to sustain us under its various trials, and enable us to make a right and comforting use of them ; and to point us to a better and happier state of existence beyond the grave, and prepare us for it.

So long as the insane have any exercise of their reasoning faculties left, and any moral and religious susceptibilities to be appealed to, (and no inconsiderable portion of them retain more or less of these faculties and susceptibilities, and some of them in a striking degree,) so long Divine Truth, with its higher motives and consolations, will be found eminently adapted to the exigencies of their unfortunate condition, and one of the most salutary and efficacious means of cure. To what extent the influence of

this Truth can be beneficially employed, time and a careful experience will show. Its effects should be critically noticed and compared at different Institutions. That the results will furnish much that is deeply interesting and instructive, there can be no doubt.

In exhibiting these views, however, it ought to be stated, that the Chaplain by no means regards it the part of a wise performance of his duty, in his personal intercourse with the patients, to confine himself to conversation on religious topics merely. He endeavors, in accordance with the general counsels, and often with the specific suggestions of the Physician, to adapt the mode of this intercourse to the peculiar exigencies of the case. He appears among the inmates of the Retreat as their sympathizing friend. He exchanges with them the customary civilities of social life. He listens to their conversation, and lets them see that he is interested in it. He often introduces other than grave and serious subjects, adapted to afford rational instruction, or innocent entertainment ; nor can he discover that in doing this, he is exposed to any disparagement of the proper dignity of his office, by the want of courtesy and respect on the part of those whom he seeks to benefit. It is, indeed, by pursuing such a course, that he hopes to avail himself of the suitable opportunities when they offer, and they not infrequently do offer, of presenting, in the most favorable manner, the simple and consoling truths of the Gospel.

The patients themselves seem evidently to appreciate their religious privileges. They show this in their attentive and serious deportment while engaged in social and public worship, so that it very rarely happens that any thing occurs to disturb these exercises ; and when it does, it is only an instance of excitement in a single individual, and perfect order and tranquillity are immediately restored.

They show this in the uniform kindness and respect with which they treat the Chaplain when he makes his visits among them ; in the opportunities which they, from time to time, solicit of personal conversation with him ; in the consolation which they seem to experience, in uniting, when their peculiar circumstances require it, in his private supplications with them at the throne of

grace; in the pleasant interest which not a few of them take in the perusal of the Sacred Scriptures; and, as they become convalescent, and are preparing to return to their friends, in their expressions of satisfaction and thankfulness for having enjoyed these religious privileges.

The good order, too, of such a numerous household, including the Officers of the Institution, and others who are engaged in the management of its internal affairs; the conscientiousness, faithfulness, and kindness with which their various duties should be discharged; and the diffusion throughout the whole establishment of that spirit of self-denying benevolence which the Gospel teaches and inspires, are best promoted by constantly bringing before their attention, and commending to their cordial acceptance, as the rules of their conduct, the principles, the motives, and the encouragements contained in the Oracles of Divine Truth.

May we not hope, that in thus acknowledging the efficacy and the blessings of this Truth, we shall be in the way of drawing down upon the Institution the guidance, protection, and favor of the Author of it, and of every good and perfect gift.

In conclusion, I would once more express the deep gratitude which I feel for the very kind manner in which my labors have been uniformly treated by the Superintendent and other Officers, including our worthy Matron, by the attendants, nurses, and all the inmates; and my earnest wishes that a kind Providence may ever watch over the concerns of the Retreat, and make it an instrument of great good, as we trust it has already been, to those for whose benefit it was established.

T. H. GALLAUDET.

Hartford, May 10, 1844.

THE FOLLOWING ARE THE PRESENT TERMS OF ADMISSION.

For patients belonging to this State, with the usual accommodations, - - *	\$3 00 per week.
For those belonging to other States, - -	\$3 50 per week.
For patients belonging to this State, with accom- modations in the centre building, and a separate attendant, - - -	\$10 00 per week.
For those belonging to other States, - -	\$12 00 per week.

No patient to be admitted for a shorter term than three months,
and payment for that term to be made in advance.

For the admission of patients, apply to either of the Managers, or
to the Superintendent.





TWENTY-SECOND ANNUAL REPORT

OF THE

OFFICERS

OF THE

RETREAT FOR THE INSANE,

AT

HARTFORD, CONN.

MAY, 1846.

HARTFORD:

PRINTED BY CASE, TIFFANY AND BURNHAM.

Pearl street, corner of Trumbull,

1846.

OFFICERS

OF THE

RETREAT FOR THE INSANE.

FOR 1846.

RT. REV. THOMAS C. BROWNELL, *President.*
DAVID WATKINSON, *Vice President.*
WILLIAM T. LEE, *Treasurer.*
A. M. COLLINS, *Auditor.*
CHARLES SHELDON, *Secretary.*

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THOMAS S. WILLIAMS,	*JOSEPH BATTELL,
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*DAVID PORTER,	*ABIGAIL HUBBARD,
REUBEN LANGDON,	*OBADIAH BROWN.
*OLIVER D. COOKE,	

Directors chosen at the Annual Meeting.

JAMES WARD,	CYPRIAN NICHOLS,
JOSEPH TRUMBULL,	THOMAS DAY,
GEORGE SUMNER,	WILLIAM T. LEE,
JOHN BUTLER,	AMOS M. COLLINS,
THOMAS H. GALLAUDET,	NATHAN JOHNSON,
CHARLES SHELDON,	ALFRED SMITH,
ISAAC D. BULL,	JOHN S. BUTLER,
THOMAS C. PERKINS,	THOMAS ROBBINS,
RODERICK TERRY,	EZRA CLARK,
JOHN OLMSTED,	ISAAC TOUCEY.

State Commissioners.

HIS EXCELLENCY ISAAC TOUCEY,
JOHN T. NORTON, Esq.,
LEONARD HEBARD, Esq.

Medical Visitors.

GEORGE SUMNER, M. D.	BENJ. ROGERS, M. D.
N. B. IVES, M. D.	WM. S. PIERSON, M. D.
ARCHIBALD WELCH, M. D.	E. K. HUNT, M. D.

Managers.

JAMES H. WELLS,
CHARLES SHELDON,
WILLIAM T. LEE.

Visiting Committee of Ladies.

MRS. R. WATKINSON,
MRS. CHAS. SHELDON,
MRS. WILLIAM T. LEE,
MRS. HENRY HUDSON,
MRS. ELI TODD.

JOHN S. BUTLER, M. D., *Physician and Superintendent.*
REV. THOMAS. H GALLAUDET, *Chaplain,*
DANIEL BROOKS, M. D., *Assistant Physician.*
MR. VIRGIL CORNISH, *Steward.*
MRS. M. H. CORNISH, *Matron.*

REPORT OF THE DIRECTORS.

THE Connecticut Retreat for the Insane is a purely charitable Institution. Neither the members of the society, nor the Directors, have any interest in pecuniary profits. They are trustees, in fact, for the Insane, and their services are rendered without compensation.

During the past year the number of patients has been greater than in any previous year. For particulars we refer to the various tables and ample details of the superintending Physician's report. The cases of recovery and improvement confirm our previous experience of the benefits resulting from the Institution.

Two new wings have been built, and large alterations made in the old buildings, without apparent injury to the patients. The accompanying statement of the building committee will explain the character and objects of the recent additions and improvements.

The chaplain's report shows the utility and influence of the religious instruction and worship in the institution.

The Directors are happy to express their satisfaction, with the proceedings and success of the superintending Physician and his Assistant, with the Chaplain, the Steward and Matron, and others concerned in the care of patients, or in conducting the establishment.

The accounts of the Treasurer and Steward, exhibit the amount and objects of expenditure, for the past year, and have been duly audited and examined. A due regulation of the expenditures requires great vigilance and sound discretion, guided by a clear perception of the objects and aim of the Institution. If this were a poor-house, if the Insane could be restored to reason in a poor-house,—the expenses could be reduced. Neither is it merely or principally a place for the idiotic, nor for those who are incurably demented. Its leading

object should be to cure those insane persons who have not become incurable ; to relieve while their malady is yet recent, and to restore them speedily, thus preventing their disease from becoming chronic and recovery almost hopeless. Peculiar expenses must occur in a retreat for insane patients, conducted with a view to their speedy recovery. We have a superintending physician to devote his whole time and attention ; and now, an assistant physician, a chaplain to conduct daily public worship in the chapel, and to give frequent private counsel and consolation ; a steward and matron to provide for the family of the Retreat, and oversee and regulate the economy of this large household ; numerous attendants to control the insane by their presence, and especially those who are liable to become dangerous to themselves or others. Fuel, lights, medicine, books, riding abroad and other diversions, are also provided.

In the first years of this Institution, the patients were few, rising gradually to thirty, forty, and upwards. Its successful treatment of insanity made known its usefulness. The buildings were twice enlarged, as the number of patients increased. Many, however, in the state, were unable to partake of its benefits. Some were at large until for homicide or other dangerous violence, they were confined in gaol or the state prison, for safe keeping. Some were restrained by chains, or grates, or in secluded rooms, or solitary cabins in the woods. Rarely in public view, the condition of the maniac was often studiously concealed, and was generally but little known, even to the neighborhood. Not that their relatives were necessarily more cruel than other men. The time and labor of such relatives was often indispensable to the support of themselves and families. They knew little of the means or hopes of effecting a cure. Insanity had changed the maniac's love into hatred. His disease was more and more aggravated and confirmed by the chains, the dungeons and other restraints and privations, whose necessity he could not comprehend.

The benefits conferred by the Retreat, had become extensively known and appreciated, when, in 1837, some benevolent persons sent circulars through the state, to ascertain the number and condition of the insane. From the replies which were returned, the whole number of insane and idiots in the state was estimated to be over nine hundred. The facts collected, and the estimates founded on them, were pre-

sent to the consideration of the General Assembly in May, 1838. The Assembly appointed a committee to apply to the Selectmen of each town for further information. Returns were received from one hundred and eighteen towns, showing, that of the insane and idiots, two hundred and fifty-eight were entirely supported by towns, and that four hundred and forty-nine others received assistance, or were supported by charity. Of these, fifty-nine were found caged or manacled, and a few others were in gaol or the State prison for safety.

In 1839, a committee of the General Assembly made a report recommending an appropriation of twenty thousand dollars, by the state, to erect a building for one hundred and fifty patients. It passed the House of Representatives, with only twelve dissenting votes. The Senate, however, proposed a substitute, which was adopted, by appointing a committee to prepare a plan with estimates, and likewise to select an eligible location, and to make report to the next General Assembly. Their report was made in May, 1840, and the subject further postponed, with a resolve directing the Secretary of State to ascertain from the Selectmen of each town, their number of insane and idiotic poor. Fifty-four towns made returns, showing an aggregate of one hundred and seventy-nine insane, and one hundred and thirty-six idiotic, making together three hundred and fifteen. Allowing the same proportion, for those towns which made no returns, there were then in the State, four hundred and sixty-five insane, and three hundred and fifty-three idiotic, whole number eight hundred and eighteen, of whom three hundred and twelve were supported by towns, and five hundred and sixty-five by their own means, or by their friends.

In 1841 the General Assembly appointed a joint committee on this subject, Dr. Charles Woodward, chairman, from whose valuable report the facts before mentioned have chiefly been condensed. That committee added as follows: "We have at least from seven hundred to eight hundred insane and idiotic poor; there will probably average about eighty in confinement, either in prisons, alms-houses or private cells." This committee recommended an appropriation of 20,000 dollars, and the appointment of a committee with power to select a site, and erect a State Asylum for the Insane. The Directors of this Institution had presented a memorial to the

same General Assembly, offering some accommodation to the indigent insane at the Connecticut Retreat, and having in view the erection of additional buildings. No decisive action on this subject was taken by the General Assembly until the session of 1842, when, by a unanimous vote in both branches of the Legislature, two thousand dollars a year for five years were appropriated for the support of insane poor persons at the Retreat. The amount of appropriation has since been enlarged. Patients increased until additional buildings became necessary. At their session in May, 1843, the General Assembly, "to encourage the Retreat to erect such buildings—Resolved, that the Governor, as Commissioner, should be authorized to advance to said Retreat the appropriation of two thousand dollars a year," (made at the previous session,) "for the term of five years, but to be repaid by supporting state patients at the Retreat," which has been done, as required.

Thus the question came up whether the Directors should expend the larger portion of their pecuniary funds in erecting new buildings, to accommodate state patients. The state was not pledged as to its future action. Nor was it desirable that they should be pledged. But the Directors saw with what strict investigation and long deliberation the State had prepared itself for action, and with what unanimity the support of the insane poor had been undertaken by the legislature. They saw too that public opinion was building up similar institutions in all the neighboring states. Above all, the Directors, some of them for twenty years in succession, had seen with their own eyes the cures, the comforts, the blessings to the insane, resulting from the Retreat, and they could not hesitate to appropriate the fund to enlarging the accommodations for this most unfortunate class of men, in accordance with the expressed wish and encouragement of the General Assembly.

They have accordingly expended upwards of forty thousand dollars, five thousand of which was granted by the State, payable half in 1845, and half in 1846. The residue has been taken from a fund, heretofore belonging to the corporation, and which is now nearly exhausted.

In reviewing the origin, progress, success and present condition of the Retreat, we see many reasons for thankfulness to that kind Providence which has thus far blessed its labors, and to whose protecting care we cheerfully leave its future interests.

*Statement of the principal improvements recently made by order of
the Board of Directors, and the cost of the same.*

They consist of a Dwelling house for the Physician ;—the new Wings for the patients ; the connecting Wings ;—the associated Dormitories ;—and the removal of the old barns, and building a new one.

The two new Wings, each 120 feet long and 36 wide, contain six parlors or day rooms, 21 feet by 18, and 144 rooms, each 10 feet by 8, for bed rooms for the patients and attendants, store rooms, &c. Some of these rooms are coupled by doors in the partitions, so that the bed of the patient can be seen from that of the attendant. The rooms are all well warmed by heated air from furnaces securely placed in the basement, and are ventilated by two 4 inch openings, from near the top and bottom of each room, into flues leading into the attic.

The windows of the bed rooms, as well as of the parlors or day rooms, are provided with green venetian blinds and immoveable wrought iron sashes made to correspond with the window sashes so as not to appear.

The Halls are spacious and airy, being nine and ten feet high, ten wide, and running through the building 120 feet.

There are sufficient passages and doors from the Wings into the yards, or “airing courts,” and the patients can, at all suitable times, have access to them. Still the arrangement to prevent their escape is such, that they cannot leave the Institution, without passing through the center building in sight of the officers. These yards are to be ornamented with grass patches, shrubbery, and flowering plants.

In the *connecting Wings*, are bathing rooms, water-closets, rooms for washing and dressing patients, and for heating water for the baths. From large tanks in the attic, into which water from the reservoirs is forced, a supply is furnished for the boilers, water closets, and the different classes of patients.

The alteration, to a limited extent, of the bed rooms of the Wings, will be likely to attract the attention of the friends of the Institution. Heretofore, each patient occupied a single-bedded room; now, the system of *associated Dormitories* has been adopted, for a part of the patients, of each sex. They are of medium size, being calculated for, from 8 to 12 beds each. This system is regarded as one of great advantage to a class of patients, who are timid and fear to be alone. It also secures a better supervision, for a class that requires it.

The *house for the Physician* is situated north of, and about 300 feet from, the Retreat buildings. This house, and the Wings of the retreat, are built of Portland stone and stuccoed. It has good accommodations for the family, and an office for the Physician.

The barns are now conveniently located, with room for 4 horses, 9 cows, and 30 tons of hay; a celler under the bay, for vegetables for the cattle; a granary; straw-lofts, &c. The carriage house, and store-room for sleighs, waggon, &c. are convenient and ample.

The cost of all the improvements, as per accounts and vouchers submitted to the Directors at their last meeting, amounts to thirty eight thousand, eight hundred, and forty three dollars, ninety-eight cents. Since that meeting, the then unsettled claims have been paid, amounting to about twelve hundred dollars more.

CHARLES SHELDON,
Chairman of the Building Committee.

HARTFORD, April 11, 1846.

*Abstract of expenditures on account of the Retreat for the Insane
from May 1, 1845 to May 1, 1846.*

Meat and fish,	\$1956 71 $\frac{1}{4}$
Bread Stuffs,	1180 18 $\frac{3}{4}$
Butter and cheese,	1318 76
Groceries, fruit, eggs and milk,	1427 29
Furniture and bedding,	2650 23
Wood, coal and lights,	1405 17
Repairs and improvements,	3965 73
Clothing for Patients, to be repaid,	1405 48
Wine, Medicine, &c,	455 01
Feed, straw and vegetables,	593 05
Wages of attendants, domestics, and farm labor,	4774 75
Cash refunded to Patients,	107 39
Salaries,	3250
Insurance \$183,50. Rent \$180,	363 50
Mr. Austin for architectural drawings,	30
Incidental expenses,	157 59
Paid for fitting up Chapel,	1250
Printing,	63 50
	<hr/>
	\$26,354 35

Orders drawn by Chairman of the board of Managers,	\$24,478,56
Balance in the Steward's hands May 1, 1845,	526,36 $\frac{1}{4}$
Balance to the Steward May 1, 1846,	99,42 $\frac{3}{4}$
Orders drawn by Committee for fit- ting up the Chapel,	1,250
	<hr/>
	\$26,354 35

JAMES H. WELLS,
Chairman of the Board of Managers.
HARTFORD, May 7th, 1846.

THE
 TWENTY-SECOND ANNUAL REPORT
 OF THE
 PHYSICIAN AND SUPERINTENDENT
 OF THE
 RETREAT FOR THE INSANE,

For the year ending March 31, 1846.

THE Physician and Superintendent of the Connecticut Retreat for the Insane submits to the Board of Directors the *Twenty-Second Annual Report* :

At the beginning of the year the whole number of Patients in the Retreat was

	Male	Female	Total
Admitted during the year,	53	50	103
	56	72	128
Total number in the course of the year,	109	122	231

Of this number there have been

	Male	Female	Total
Discharged Recovered,	24	31	55
“ Improved,	17	15	32
“ Unimproved,	9	3	12
“ Died,	5	11	16
Total discharges during the year,	55	60	115
Remaining in the Retreat, April 1st 1846,	53	63	116

The number of patients remaining in the Retreat at the opening of the year was one hundred and three, the number admitted during the year was one hundred and twenty-eight, making the whole number for the year two hundred and thirty one, which considerably exceeds that of any previous year since the opening of the Institution. Of those discharged, fifty-five were recovered, thirty-two improved, twelve unimproved, and sixteen died. In the class improved are included a considerable number who were nearly well when they left, and had they remained a little longer would have recovered.

The premature removal of patients from the Retreat, continues to be to us a fruitful source of anxiety and regret, and to them fearful and cruel in its results. Of those discharged "improved," and "much improved," several were rapidly convalescing—contrary to our advice and earnest expostulation they were removed, and the results in most cases have justified our worst apprehensions; several remaining in a weak nervous condition and others relapsing into insanity. A recital of a few cases which have been recommitted to our care may prove instructive, and lead others to avoid an error always serious and often fatal in its consequences.

CASE 1.—Admitted in a most wretched state of melancholia, unwilling to speak, move or make any effort, and negligent of the calls of nature—under treatment became better, would talk, laugh, sing and walk about and was rapidly recovering his health. On his being removed contrary to our wishes and advice, he immediately relapsed, and was, the last we heard of him, a hopeless maniac, caged up like a wild beast.

CASE 2.—Admitted a violent maniac, noisy, willful and dangerous and from the nature of the cause almost hopeless—became much better, and just as we were rejoicing over the unexpected prospect of recovery, was removed on suspicion that pecuniary considerations influenced our advice. In a few months was returned to us more wretched, noisy and ungovernable than ever. This case may admit of alleviation, but recovery is hopeless.

CASE 3.—Was one of recent mania, which rapidly improved and in a short time was apparently restored—was advised to remain longer to confirm the recovery and regain general health, but in vain—went home and soon relapsed into a state worse than the first—became dangerous, beating and abusing

friends, was brought back and finally restored after a protracted residence in the Retreat of nearly a year, while two months longer on the first commitment would have ensured a permanent recovery.

CASE 4.—A dangerous maniac, extremely filthy and most desperately homicidal and suicidal—declaring “some one must be killed,” rapidly improved, became calm and in a good degree rational. Her husband came and persisted in taking her away. On coming into his presence her madness rekindled with all its fury, she rushed upon him, breaking the windows and furniture of the room. He was obliged to leave her, but before she had fairly recovered from the effects of this interview, and contrary to her most earnest entreaties she was removed. At home she made several desperate attempts at suicide, and her disease becoming aggravated, was again brought back and received on the condition that there should be no more interference on the part of her friends. Thus a case evidently curable at first, has been rendered certainly of long duration, if not of hopelessness.

It is in part from the consequences of such misjudged interference with those whose views upon this point should prevail, that the mistaken opinion has obtained so much currency in the community, that a person once insane rarely recovers his original soundness of mind. Functional disease of the brain, like that of any other organ of the body, may be entirely remedied and the organ restored to its original health. From the delicacy of its organization and its susceptibility to impressions, great caution is necessary to *confirm* convalescence before it can be safely intrusted with the excitement and fatigue of a return to familiar scenes and active duties.

The return of insanity may in most cases be prevented by an observance of the same rules which we shall presently give for the prevention of its development. In cases recommitted to our care we are generally able to point out the causes of its recurrence, and show how they might have been avoided.

Another cause of the erroneous opinion to which we have alluded is found, in the fact that peculiarities and eccentricities of character which were unnoticed previous to the accession of insanity, become afterwards the ground of remark and suspicion.

We give in the appendix an extract from a letter from a friend of a recovered patient,* which with many others of a similar character, affords a grateful contrast to the cases above cited.

TABLE I.

SHOWING THE NUMBER OF ADMISSIONS, RECOVERIES, AND DEATHS, ANNUALLY, FROM THE OPENING OF THE RETREAT, APRIL 1ST, 1824.

		Total Number Admissions.	Total Number Recoveries.	Total Number Deaths.
Admitted	1824-5	44	10	1
"	1825-6	33	16	1
"	1826-7	37	24	0
"	1827-8	40	27	4
"	1828-9	42	26	2
"	1829-30	51	28	0
"	1830-1	53	32	1
"	1831-2	80	46	6
"	1832-3	68	37	4
"	1833-4	72	43	3
"	1834-5	72	36	6
"	1835-6	73	42	6
"	1836-7	91	55	6
"	1837-8	67	42	10
"	1838-9	94	49	8
"	1839-40	84	50	2
"	1840-1	67	38	9
"	1841-2	96	56	8
"	1842-3	83	45	7
"	1843-4	80	44	9
"	1844-5	105	45	11
"	1845-6	128	55	16
Total,		1560	846	120

* See Appendix, A.

TABLE II.—MONTHLY ADMISSION OF PATIENTS FROM THE OPENING OF THE RETREAT, APRIL 1st, 1824.

YEAR.	April.		May.		June.		July.		Aug.		Sept.		Oct.		Nov.		Dec.		Jan.		Feb.		Mar.		Total.	Male	Female	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.				
1824	5	2	5	3	3	1	0	0	4	1	1	2	3	1	2	1	2	0	1	1	2	0	3	1	44	31	13	
1825	2	0	0	3	0	3	1	3	4	1	0	1	0	1	1	0	1	3	2	3	3	1	2	1	34	14	20	
1826	0	1	4	2	2	2	2	2	2	1	2	2	2	2	2	0	0	1	2	3	1	0	0	36	23	13		
1827	1	0	0	0	1	1	1	2	1	4	2	5	2	2	1	1	5	2	0	1	0	3	3	40	18	22		
1828	2	1	4	4	1	3	2	2	5	1	2	2	1	4	2	0	0	1	0	1	1	1	0	42	23	19		
1829	2	2	4	2	2	3	3	3	2	1	2	2	2	2	2	1	3	2	4	2	2	3	0	52	25	27		
1830	2	2	1	2	3	3	4	4	2	3	3	3	0	4	3	3	2	1	0	1	4	2	2	53	24	29		
1831	2	3	5	4	4	6	7	7	1	3	5	7	3	3	3	3	1	1	4	3	1	3	3	81	36	45		
1832	4	4	3	6	4	4	4	2	4	2	2	2	2	3	4	0	2	2	3	0	0	4	4	67	37	30		
1833	4	1	0	0	7	2	1	5	3	6	7	3	5	3	3	3	2	2	2	0	6	4	3	72	46	26		
1834	1	3	4	3	5	5	7	2	2	3	3	0	3	4	2	2	2	0	3	5	0	2	4	72	35	37		
1835	1	2	5	6	3	9	2	5	0	7	3	11	5	4	3	4	4	0	1	4	1	2	1	91	26	47		
1836	1	5	6	4	3	2	5	7	4	5	3	4	4	2	2	4	3	5	6	5	5	1	1	67	37	30		
1837	2	3	2	4	5	0	1	5	4	5	2	2	2	2	2	5	6	2	3	6	1	0	0	94	51	43		
1838	4	4	6	3	4	8	3	1	4	5	4	7	4	4	3	2	6	6	3	2	2	5	3	83	42	41		
1839	2	2	5	4	6	8	6	3	3	7	3	3	5	3	1	4	2	3	2	2	1	0	2	67	36	31		
1840	4	1	6	1	3	1	1	5	3	2	3	5	2	2	3	2	2	4	6	4	2	2	2	96	45	51		
1841	2	5	2	4	7	8	4	4	4	1	4	3	3	1	3	3	4	0	2	3	3	5	4	83	50	33		
1842	3	5	1	3	4	2	7	2	6	7	6	2	3	3	1	1	7	2	3	2	4	0	0	80	51	29		
1843	2	6	4	3	6	3	6	6	5	5	4	2	4	0	6	1	4	1	3	3	1	1	3	105	56	49		
1844	4	2	2	4	5	5	5	11	8	1	5	6	5	5	6	2	4	5	5	5	1	2	6	128	56	72		
1845	4	4	9	5	7	9	6	13	5	6	4	4	5	9	6	5	2	3	2	7	3	1	3	6	128	56	72	
To'tl.	54	58	81	70	85	87	77	83	79	83	67	78	65	60	65	47	62	47	56	59	51	37	62	47	1560	804	756	
Grand Total.	112	151	172	160	162	155	160	160	162	155	125	125	112	109	115	88	109	88	115	115	88	109	88	109	88	109	88	109

TABLE III.

GENERAL STATISTICS.

	1843-4	1844-5	1845-6
Cases Admitted,	80	105	128
Discharged and Died,	86	85	115
Daily average number for the year,	84	97	121 $\frac{1}{2}$
Greatest number in the Retreat on any one day,	111	105	132
Least " " " " "	78	82	103
Whole number in the Retreat during the year,	169	188	231
Remaining at the end of the year, . . .	83	103	116

TABLE IV.

MONTHLY ADMISSIONS AND DISCHARGES.

MONTH.	Admissions.			Discharges.			Average.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
April,	4	4	8	2	2	4	54	51	105
May,	9	5	14	2	1	3	59	54	113
June,	7	9	16	3	5	8	64	58	122
July,	6	13	19	8	7	15	65	64	129
August,	5	6	11	6	7	13	64	65	129
September,	4	4	8	7	4	11	59	62	121
October,	5	9	14	4	11	15	62	63	125
November,	6	5	11	7	2	9	60	64	124
December,	2	3	5	3	5	8	58	66	124
January,	2	7	9	5	1	6	55	69	124
February,	3	1	4	5	3	8	53	62	115
March,	3	6	9	3	12	15	53	71	124
Total,	55	73	128	65	50	115	Average for the year 121.25.		

A more extensive observation has disproved the opinion formerly prevalent that climate had a tendency to produce particular varieties of mental derangement. It is probable that climate, independent of other influences, cannot be considered as an exciting cause of this disease.

The accompanying table shows that the *seasons* of the year exert a decided influence, and confirm the opinions of Esquirol and others on this point and justify the conclusion, that when the thermometer ranges the highest in temperate regions, the number of the insane is greatly augmented. We find five thousand nine hundred and forty patients admitted into the Hospitals at Worcester, Bloomingdale, Philadelphia, Eastern Virginia and Hartford; and twenty thousand seven hundred and eighty-eight, admitted into the Asylums of La Salpetriere, Becitre, Charenton, Rouen and Tours, (as given by Dr. Baillarger,) distributed in the different seasons as follows:

AMERICAN HOSPITALS.

January,	410.	July,	547.
February,	391.	August,	533.
March,	450.	September,	503.
April,	490.	October,	524.
May,	583.	November,	446.
June,	622.	December,	441.

TOTAL, 5940.

FRENCH HOSPITALS.

January,	1473.	July,	2033.
February,	1481.	August,	1343.
March,	1617.	September,	1689.
April,	1784.	October,	1700.
May,	1948.	November,	1568.
June,	2079.	December,	1573.

TOTAL, 20,788.

These tables show us that the number of cases of insanity increases with considerable regularity from January to June, and decreases from June to December.

The whole number of cases in the six warmest months will be found to considerably exceed those of the six coldest. In the American table the excess is 616, and in the French table 1964. Thus:

The whole number in April, May, June, July, Aug. and Sept.,	3278
“ “ “ Oct., Nov., Dec., Jan., Feb., and March.	2262

(American table.) Difference, 616

The whole number in April, May, June, July, Aug. and Sept.,	11376
“ “ “ Oct., Nov., Dec., Jan., Feb. and March,	9412

(French table.) Difference, 1964

If we compare the three hottest with the three coldest months we shall find the difference more conclusivè. Thus :

June, July and August,	1702
December, January and February,	1242—460. (American table.)
June, July, and August,	5955
December, January and February,	4527—1428. (French table.)

The influence of a high temperature in producing insanity, thus satisfactorily shown, cannot but impress us with the necessity of great caution during such periods wherever the predisposition exists, to prevent its developments, and to guard against its aggravation in cases already existing. Statistical investigations give the same results as to the frequency of suicides and crimes against the person.

TABLE V.

PROBABLE CAUSE OF DISEASE IN THE CASES ADMITTED THIS YEAR.

Ill Health,	16	Masturbation,	6
Intemperance,	11	Anxiety and fatigue,	3
Puerperal,	8	Loss of Children,	2
Domestic trouble or affliction,	9	“ “ Husband,	2
Undue mental application	8	Fever,	3
Religious excitement,	7	Suppressed Secretion	2
Business perplexities,	6	Mal Formation, Congenital,	1
Undue Bodily exertion,	4	Insufficient nutrition, (Grahamism,)	1
Turn of Life,	2	Epilepsy,	1
Loss of Property,	2	Disappointed ambition,	1
Injury of Head,	1	Abuse of Husband.	1
Disappointed affection,	5	Unknown	26
Hereditary predisposition,	47		
		TOTAL,	128

In no one of the maladies to which we are exposed, are the remote causes of disease so obscure and uncertain as those that affect the mind. Of many of the *proximate* causes we must be content to remain in ignorance until the secret springs of life itself are revealed to us, and we are enabled to anatomize the structure of the mind, as definitely as that of the body, and gain a fuller understanding of that mysterious and intimate sympathy which exists between them. The reciprocal influence between the mind and body, and the general physical and moral causes by which each is affected, are readily perceived, and though the mode of their action is unknown, the effects are striking and important. To reach diseases arising from this intimate union and sympathy, a careful in-

investigation of the history of these causes becomes of primary importance. A continued experience leads me to place less and less dependence upon the statements made by the friends of those who are afflicted with derangement of the mind, without a more particular examination into the origin and history of the disease. Subsequent and more careful investigations frequently prove that friends have been entirely misled in reference both to the origin and duration of the disease. I have derived much assistance in obtaining a more satisfactory history of cases, from the circular letter, a copy of which is given in the appendix.

The particular subject upon which a diseased mind may fasten, is not *universally* by any means, the one by the undue influence of which this diseased condition has been induced, though often associated in some manner with it. This is strikingly illustrated in cases of religious melancholia, where the patient indulges in desponding views of his spiritual condition. This is uniformly attributed to undue religious anxiety; but true religious anxiety—an honest and careful searching after the truth, as it is revealed to us in the scriptures, is according to my observation, one of the most rare causes of insanity. I cannot recall an instance, though undoubtedly there may be such. Religious melancholia is generally found in bilious or melancholic temperaments, and in those whose opinions on this subject are fixed and decided, and who have been living in accordance with their convictions, as the fear of poverty, not an uncommon topic of insane thought, is rarely found except in those whose circumstances are easy and comfortable. The prevailing subject of meditation—that upon which the mind has loved to dwell, is often the one upon which when diseased, it fastens as the absorbing topic of thought and reflection. But this exclusive action of the mind is the effect, and not the cause of disease. It is true that reason is often dethroned when more exciting considerations are unduly and unwisely pressed upon an enfeebled and sensitive mind. In a case on our records, the gloom arising from physical disorder was thus mistaken for spiritual anxiety, in one whose religious character was beyond a reasonable doubt. Immediate repentance was urged, by night and by day, until the patient was driven to distraction, and became a patient of the Retreat—where for months she was a wretched and almost hopeless

maniac. It may be interesting to state that in this case, the treatment that proved successful, was in the first place, the correction of the functional disease of the liver and stomach, and the restoration of the general healthy tone of the system; the withdrawal of all sympathy from ourselves and others around her in the terrific doom that she supposed awaited her in eternity, and occasionally in a clear and calm manner showing the origin of all her difficulties to be in a diseased state of physical health—and in the second place, by diverting the mind to other subjects of thought, and employing it in pleasant and cheerful occupation, avoiding all argument upon the particular subject of her delusions. Happily, this method of treatment has generally proved successful in such cases, which are among the more frequent and most afflictive forms which come under our care.

Millerism and its kindred delusions are frequent causes of insanity. Most of the cases that have come under my observation, have been in unlearned and simple hearted persons, who, unaccustomed to constant mental application, have devoted day and night to the investigation of those mysteries of the scriptures which are hidden from the wisest. The mind being highly excited by the immediate expectation of those terrible events, which they believed to be so near at hand, the consequent loss of sleep and neglect of food have soon destroyed the healthy tone of the system, and the mind has, from constant irritation, been driven into mania, or from exhaustion, has sunk to deep and settled despondency. But it is not honest to charge these melancholy effects to the influence of religion. Pure religion, in its legitimate influence, produces no other insanity but such as was charged of old on the apostle Paul, while the consolations of the christian hope and the controlling influence of a sound religious faith, are the surest safeguards against that uneasiness and irritation of mind which are among the commonest causes of insanity, and have proved in innumerable instances the means of averting it when the mind has been deeply agitated or depressed by trial and misfortune.

The term hereditary insanity is retained in this table, though objectionable from the general misapprehension of its meaning. An erroneous opinion prevails on this subject, founded on the exploded idea, that insanity arises from disease seated

in the mind itself, and therefore, that hereditary transmission is direct and unavoidable; but no theory is more destitute of foundation, or more unhappy and cruel in its influence. "Every disease that assumes a constitutional character," says John Hunter, "may be transmitted from parent to child and then becomes what is called hereditary." There is, however, he adds no such thing as hereditary disease, but there may be a predisposition to disease. This is an important distinction, as in the one case all prophylactic treatment would be useful while as a fact ~~it~~ when properly administered it is generally successful in averting the disease. It is true that this predisposition is a frequent cause of insanity, and it is equally true, that disease from this cause is at least as easily reached as when arising from any other. To call this predisposition into action requires some exciting cause. It therefore becomes important to guard the system against the action of such cause, and unquestionably in a great majority of cases this may be successfully done. The very adoption of this belief will be a decided step towards its fulfillment, especially with those whose hearts have been weighed down with the apprehension of impending insanity, from which they believed there was no escape. Particularly in the melancholy and nervous temperament, in which we have the greatest reason to fear the development of this predisposition, these gloomy forebodings must act directly as an exciting cause. Let it be deeply impressed upon the minds of such, that, pursuing a proper course of treatment, they may as easily avert these dreaded consequences as pulmonary and other disorders are often prevented from development when the predisposition has been known to exist.

Let all exciting causes be carefully and perseveringly guarded against—all excess avoided—and those occupations and professions which, by calling for undue application, endanger the physical health, or produce mental excitement and irritation. Esquirol urges upon those who have the training of children, to give them an education which shall render the habit robust, to harden it against the ordinary causes of disease, and especially to place them in different circumstances from those with which their parents were environed. Thus to put into practice the aphorism of Hippocrates, who advises to alter the constitution of individuals to prevent the diseases with which they are threatened by the hereditary predisposition of the family. This sub-

ject is becoming of more and more interest and importance. In the cities and more densely populated portions of New England, and the Middle States, at least, insanity is increasing, and this increase is in a greater ratio than that of the population. After making liberal allowances for the errors of the census, it appears that in no section of the world is insanity more prevalent than in this. We may undoubtedly trace this startling effect to the general restlessness and excitement that pervades the community, and the general indifference to the most common and essential physiological laws. As a community we have too little recreation—too little regard for the refreshing and invigorating influences of social intercourse; and far too little time is given to the enjoyment of literary and scientific pursuits. Our devotion to business of every kind, is too long continued and too absorbing. We rise early and sit up late, and eat the bread of carefulness, and eat it hastily, that we may carry out those plans of advancement which are so engrossing. The deep traces of care and anxious thought are written on the brow, and their corroding influences consume not only the elasticity of our frame, but in too many instances, it is to be feared, the better feelings of the heart. These influences pervade society in this country more than any other on the globe. They draw within their vortex many who would gladly escape them, and increasing with the flood-tide of national prosperity, threaten to engulf the better feelings and sympathies of the nation in the maelstrom of ambition and gain. Remonstrating one day with an intelligent young merchant on the folly and danger of devoting himself so exclusively to his business, to the neglect of exercise and the enjoyments of the family circle, he confessed that it was wrong, but plead that the eager competition that existed around him required the devotion of all his time and energies to sustain his character as a business man. “I never allow myself more than five minutes for any meal,” said another, who in one month was a raving maniac.

There are considerations of the highest importance, which should arrest the attention of those who seek the real welfare of their fellow men, the prevention of suffering, and the increased diffusion of human happiness. While so much is doing for the care and restoration of those afflicted with mental derangement, it is singular that such indifference should prevail in regard to its prevention. That public sentiment which would not tolerate

the overworking of the physical powers of the child, or the adult, in the workshop or manufactory, allows the delicate organization of the brain to be prematurely developed and overtaken by excessive and unnatural application to the various pursuits and employments of the day. There are, however, some cheering indications of a better state of things. It is to be hoped that a more general knowledge of the simple principles of physiological science will do much to correct the wide spread errors both in theory and practice which now prevail. The penalties attached to all violations of the natural laws are as inevitable as those consequent to the transgressions against the moral laws of our being. There is no axiom in physiology more true or more frequently disregarded than that "health of body and mind is more frequently undermined by the gradual operations of constant though unperceived causes, than by any great and marked exposure of an accidental kind."

TABLE VI.

DURATION OF DISEASE ON ADMISSION.

Duration.	Males.	Females.	Total.
Less than 1 month,	6	13	19
From 1 to 3 months,	10	18	28
" 3 " 6 "	1	4	5
" 6 " 12 "	4	3	7
" 1 year to 2 years,	5	1	6
" 2 " 5 "	5	9	14
" 5 " 10 "	2	1	3
" 10 " 20 "	1	5	6
Unknown,	22	18	40
Total,	55	73	128

TABLE VII.
NUMBER OF ATTACKS AND ADMISSIONS.

Number of Attacks.	Male.	Female.	Total.	Number of Admissions.	Male.	Female.	Total.
1st Attack,	42	49	91	1st Admission,	43	56	99
2d “	8	14	22	2d “	9	14	23
3d “	1	1	2	3d “	2	2	4
4th “	1	4	5	4th “	0	1	1
Several “	2	4	6	5th “	1	0	1
Many “	1	0	1				
Unknown	0	1	1				
Total,	55	73	128	Total,	55	73	128

TABLE VIII.
AGES AT THE TIME OF ADMISSION AND AT THE TIME OF FIRST
ATTACK.

AGES.	When admitted.			When first attacked.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under 15 years,	1		1	2		2
From 15 to 20 years,	6	2	8	8	7	15
“ 20 “ 25 “	8	4	12	9	7	16
“ 25 “ 30 “	9	10	19	7	12	19
“ 30 “ 35 “	8	10	18	10	9	19
“ 35 “ 40 “	5	11	16	1	11	12
“ 40 “ 45 “	5	12	17	5	5	10
“ 45 “ 50 “	2	6	8	2	2	4
“ 50 “ 60 “	6	12	18	2	8	10
“ 60 “ 70 “	4	4	8	2	1	3
“ 70 “ 80 “	1	1	2	1	1	2
Unknown,		1	1	6	10	16
Total,	55	73	128	55	73	128

TABLE IX.
CIVIL CONDITION.

Civil Condition.	Males.	Females.	Total.
Married,	26	37	63
Single,	28	28	56
Widowed,	1	8	9
Total,	55	73	128

TABLE X.

OCCUPATION.

Males.	No.	Females.	No.
Farmers,	18	Wives of Farmers,	19
Merchants,	6	“ Mechanics,	9
Mechanics,	6	“ Merchants,	4
Students,	5	“ Physician,	1
Clerks,	2	“ Manufacturer,	1
School Teachers, . .	2	“ Ship master,	1
Jewelers,	2	“ Printer, .	1
Dentist,	1	“ Laborer, .	1
Physician,	1	Daughters of Farmers,	6
Printer,	1	“ Mechanics,	2
Silver Plater,	1	“ Physician,	1
Shoe Maker,	1	“ Lawyer,	1
Tailor,	1	Domestic pursuits, .	10
Iron Founder,	1	Seamstresses,	4
Wool carder,	1	Milliners, ,	2
Spinner and Weaver,	1	School girl,	1
Rigger,	1	Factory “	1
Tinner,	1	No Occupation, .	8
Carriage maker, . . .	1		
Wool sorter,	1		
Day laborer,	1		
Total,	55	Total,	73

TABLE XI.

PLACES OF NATIVITY AND RESIDENCE.

Nativity.	No.	Residence.	No.
Connecticut,	106	Connecticut,	108
New York,	5	New York,	11
Ireland,	3	Maryland,	2
New Jersey,	2	Canada,	2
Scotland,	2	Rhode Island,	1
Rhode Island,	1	Ohio,	1
South America,	1	Illinois,	1
West India Islands,	1	South America. . . .	1
Canada,	2	West India Islands,	1
New Hampshire, . . .	2		
Vermont,	1		
Massachusetts,	2		
Total,	128	Total,	128

TABLE XII.

PATIENTS ADMITTED FROM EACH OF THE COUNTIES.

Counties.	Males.	Females.	Total.	Assisted by state.	Supported by friends.	Total.
Hartford,	10	16	26	11	15	26
New Haven,	12	14	26	11	15	26
Fairfield,	4	7	11	4	7	11
Litchfield,	8	4	12	9	3	12
Windham,	2	4	6	5	1	6
Tolland,	2	2	4	2	2	4
Middlesex,	4	8	12	6	6	12
New London,	1	10	11	6	5	11
Total,	43	65	108	54	54	108

The twelfth table shows the number of patients who have been admitted into the Institution from the different counties of the State, and the manner of their support during the past year. The whole number who have been thus assisted being 100. Applications for aid are made and the appropriations are left entirely to the discretion of the Commissioner. No judicial or other public preliminary proceedings being required, as is generally the case in those hospitals which are under the care and direction of the State, where an examination of the case before the Judge of Probate or other officers is necessary, according to form of law. The aid thus coming from the State directly, and not from the towns, the friends of the applicants are not exposed to any jealous investigation into their private affairs, or exposed to the invidious comparisons of suspicious and fault-finding individuals. The assistance thus judiciously and kindly administered, is oftentimes unknown to the patient, and that humiliating sense of dependence so oppressive to the mind, rendered doubly sensitive by disease, is avoided. No distinction is made in the classification of the patients; on account of the lowest rate of charges being the same to all, they meet in this respect upon an equal footing. The influence of this arrangement is eminently happy and beneficial. Pauperism as seen abroad, is unknown in our State. Few of our native population, beyond those who, without any fixed income, are rendered incapable of effort through the infirmities of age or

disease, are found even in alms-houses; still more rarely are they found in our wards. But there are many families whose limited income depends upon the daily united effort of its several members, who by patient industry and economy are enabled to meet their current expenditures, but have not the ability of providing, to any great extent, for the emergencies of protracted disease. In this class are to be found some of our most worthy and estimable citizens, and some too who have been in better circumstances, oftentimes rich in the esteem of their fellow citizens, though poor in this world's goods. When insanity comes to such and takes away one member of the family, the increased expense which necessarily follows, added to its diminished income, brings a heavy and discouraging weight upon those already pressed down with sorrow. Several affecting instances have come under our observation, where the friends of patients were about to remove them prematurely, who, in answer to our earnest expostulations against a course which endangered the sacrifice of all the good that might have been accomplished, have replied that they have taken this course not from ignorance or indifference to the danger, but from their utter inability to meet the expense, and reluctance to throw them upon the public charge. To such, the State brings timely and paternal aid, not grudgingly withholding its assistance until absolute destitution can be shown, and the hearts of afflicted friends become discouraged and broken. Thus too the self-respect and independence of the patient is preserved, and he returns to his family when recovered, not to find its prospects for the future darkened by the embarrassments caused through the expense of his support, but cheered by his return, and those tokens of sympathy and kindness to new efforts. Grateful for its aid, they all more fully appreciate the paternal character of that government under which it is their privilege to live.

This arrangement is also one of economy for the State. By the contribution of one-eighth of the actual cost of the Institution, it avails itself of all its advantages.

In 1844, the expense of supporting 102 old cases in five different hospitals, had amounted to \$201,336, or an average of \$1,973 88, while in the same institutions, the same number of recent cases discharged, amounted to only \$6,068 60, or an average of \$59 49. In this Institution, three cases of permanent insanity first admitted, have cost their friends \$11,100, or

\$3,700 each, while the three last cases of recovery from recent insanity have cost but \$170 74, or only \$56 96 each. Thus it is seen that these old cases, which in the early stages of the disease, might have been reached by the application of timely remedial measures, remain a burden upon the hearts and a tax upon the resources of their friends, while those cases of recent standing have been restored to soundness and health, and have returned to bear their part in the duties of life. Thus, in an economical point of view, we see the advantage of endeavoring to arrest the progress of such disease in its early stages. But there is another aspect of higher importance, and one which appeals most strongly to all the better feelings of the heart, and which can be fully appreciated only by those who like ourselves have often had the gratification of witnessing the restoration to their friends, of those who have been separated from them by this most painful of all earthly afflictions ; and who, on the other hand, have so often been called to mourn over the hopeless condition of many, who, if timely measures had been taken in the early history of their disease, might have lived to be ornaments to society, and blessings to their friends. Whatever opinion may be entertained of the increase of insanity, no one can doubt that the causes of it have never been so numerous and active as at the present time. It is greatly to be regretted, that more care has not been exercised heretofore, in collecting the statistics of insanity throughout the State, that the rate of its increase might be more accurately determined. Of the number of recent cases occurring in the State, by no means a large proportion is sent to this or any other hospital ; and as a larger number of such cases, from neglect or injudicious treatment, are yearly added to the list of the incurable insane, a rigid investigation into the number and condition of the insane in the State, is greatly to be desired. The expense of such a measure, which, to make it efficient, should be done under the direction of the State, would be trifling compared with the good it would accomplish. The result would be startling ; for there is no reason to hope that it would be any less deplorable than it has been found in the other states of New England and New York, Pennsylvania and New Jersey. The question is one of momentous interest ; what is to be done with the insane poor of the State ? and few questions more worthy of consideration, claim the attention and action of the legislature ; especially in view of the increas-

ing number and activity of the causes of insanity, and the rapidity of the transition from the recent and curable to the chronic and incurable state. In a country where the fluctuations of property are so frequent and extreme, there are few to whom this subject may not ultimately have a personal application, as no man can hold himself proof against the attacks of insanity, or control those vicissitudes which reach alike every class and condition in life. This is also a question of deep interest in a national point of view. If the opinions of Professor Buillarger, as quoted below,* are sound, it becomes us to look well to the subject, and guard with all possible diligence, and with every precautionary measure, against so serious a result, charged upon the spirit of our national institutions. A sound, economical policy, and the dictates of an enlightened humanity, both point to the only practicable method of meeting this serious difficulty. Let ample provision be made for the immediate treatment of every case of recent insanity, while those which are hopeless and incurable, may receive that care and kind attention which is necessary to their comfort, and may do much to ameliorate their condition; the State supplying, in both cases, that deficiency of means which might prevent any from availing themselves of such provisions. Could such a course be effectually carried out for a term of years, I doubt not the result would be gratifying to every benevolent heart, and an enviable pre-eminence will be due to that State which shall first be able to boast that ample provision has been made for every lunatic within its borders.

* As to the influence of political institutions, it may be said, the number of lunatics is in a direct ratio with that of the degree of liberty enjoyed by the people. Free institutions promote, in the highest degree, intellectual excesses, and the ambition of the greatest number. Struggles continually renewed, foster emotions which ordinarily induce a more or less active cerebral excitation; the stronger arrive at their objects, but many fall by the way, paying, by the loss of their intelligence, for an over-vaulting ambition.--- *Vide Lecture at La Salpêtrière.*

TABLE No. 13.

AGES OF PATIENTS DISCHARGED CURED.

Ages.				Males	Females	Total
Under 20 years	.	.	.	3		3
From 20 to 25 years,		.	.	5	3	8
“ 25 “ 30 “	.	.	.	2	3	5
“ 30 “ 35 “	.	.	.	2	3	5
“ 35 “ 40 “	.	.	.	4	5	9
“ 40 “ 45 “	.	.	.		7	7
“ 45 “ 50 “	.	.	.	1	2	3
“ 50 “ 60 “	.	.	.	4	6	10
“ 60 “ 70 “	.	.	.	3	1	4
“ 70 “ 80 “	.	.	.		1	1
Total,				24	31	55

TABLE No. 14.

TERM OF RESIDENCE IN THE RETREAT OF THOSE DISCHARGED.

	Less than 1 month	1 to 2 months	2 to 3 months	3 to 4 months	4 to 6 months	6 to 12 months	1 to 2 years	more than 2 years
Cured,								
Males, . . .		2	9	5	4	4		
Females, . . .		1	5	5	12	7	1	
Total, . . .		3	14	10	16	11	1	
Much improved,								
Males, . . .			1	2	2	4		
Females, . . .		1	1	1		2	3	
Total, . . .		1	2	3	2	6	3	
Improved,								
Males, . . .			1	1	1	3		1
Females, . . .	1		1	1		2	2	1
Total, . . .	1		2	2	1	5	2	2
Unimproved,								
Males, . . .		1			2	4		2
Females, . . .					1		1	1
Total, . . .		1			3	4	1	3
Died,								
Males, . . .						2	2	1
Females, . . .	6		1		1	2		1
Total, . . .	6		1		1	4	2	2

TABLE XV.

CAUSES OF DEATH FOR THE LAST FIVE YEARS, WITH THE
YEARLY AND TOTAL AVERAGES.

Causes.	1841-2	1842-3	1843-4	1844-5	1845-6	Total
Epilepsy,			1			1
Apoplexy,	3	1			1	5
Phthisis,	2			1	1	4
Old age,	1			1	2	4
Injury,			1			1
Fever,	1			1	1	3
Psoas Abscess,		1				1
Disease of the brain,	1			1	3	5
Internal Hemorrhage			1			1
Marasmus,				1	1	2
Fracture of thigh,			1			1
General Debility,		1		2	1	4
General Paralysis,		1		1	2	4
Exhaustion,		1	1	2	3	7
Inflammation of bowels,		1			1	2
Disease of Lungs,			3			3
Suicide,		1	1	1		3
Total,	8	7	9	11	16	51
Average per cent. . . .	4.46	4.07	5.32	5.85	6.92	5.43
Per cent. of deaths of the whole number 120 of 1560, 7.60						

The deaths for the past year have been three more than the proportional number for the preceding year. The health of our family generally has been unusually good, no epidemic disease having prevailed among us, and no instance of suicide having occurred, though the suicidal propensity has prevailed in an unusually large number of cases. While sometimes the most unremitting vigilance is eluded by the adroitness and perseverance of those who have this distressing propensity, we feel heartily grateful to that kind and watchful Providence which has protected us the past year from this calamity.

Many of the deaths for the three past years have resulted from causes in active operation before the patients were admitted into the Retreat, which, aggravated by the fatigue and excitement of removal, were consequently placed beyond the

control of remedial measures. The removal of a patient, especially from a distance, while laboring under acute febrile symptoms is an effectual method of inducing a speedy and fatal termination. It is not uncommon for patients to be brought to us in a state of collapse. We cannot shut our doors against them, and yet it is not just to the fair results of our labors to admit such cases only to swell the per centage of deaths. While mania is associated with acute febrile disease, the patient should not be removed from home, for however small the chances of life may be there, they are only diminished by removal. To the neglect of this is owing the increased number of deaths in the house during the past year.

TABLE XVI.

LENGTH OF TIME THAT THE PATIENTS REMAINING APRIL 1ST, 1846, HAVE BEEN IN THE RETREAT.

Time.	Males.	Females.	Total.
Not exceeding 3 months, . . .	7	13	20
From 3 to 6 months, . . .	9	9	18
“ 6 “ 9 “ . . .	5	9	14
“ 9 “ 12 “ . . .	6	4	10
“ 1 year to 2 years, . . .	8	7	15
“ 2 “ 3 “ . . .	2	4	6
“ 3 “ 4 “ . . .	1	1	2
“ 4 “ 5 “ . . .	3		3
“ 5 “ 6 “ . . .	2	1	3
“ 6 “ 7 “ . . .			
“ 7 “ 8 “ . . .	1	1	2
“ 8 “ 9 “ . . .		2	2
“ 9 “ 10 “ . . .	1	2	3
“ 10 “ 12 “ . . .	1	1	2
“ 12 “ 15 “ . . .	4	3	7
“ 15 “ 20 “ . . .	2	4	6
“ 20 “ 22 “ . . .	1	2	3
Total, . . .	53	63	116

The preceding tables are of unequal value, some of them being too limited of themselves to establish any general principle, but they present a basis for the accumulation of material for future reference and use, while others appear to me to offer results both interesting and important.

Medical statistics, or the "calculation of probabilities applied to the systemization of medical facts," are variously estimated. From the very nature of these facts, their varying condition and connections, perfect mathematical precision is rarely attainable in any department of medical inquiry. It is not insisted upon as essential to the deduction of practical and reliable results. It is true that averages and numerical methods can in no case afford more than an approximation to the truth; yet the approximation in regard to facts, and observed phenomena thus deduced, is closer than can be attained in any other manner. The investigations which have been made by scientific philanthropists in Great Britain and elsewhere, into the causes and the best methods of prevention of the diseases of artisans, and the influence of certain trades and occupations upon health, have been productive of signal benefit, and reflect great honor upon the wisdom and humanity of the government under whose direction they were accomplished. Although the application of the principle of numeration to practical medicine may have been unduly extolled, it cannot be denied that the genius and the system of Louis have exerted an extensive and salutary influence upon medical investigation, and that the adoption of this method of investigation by this eminent physician compelled him to reverse many of those opinions and conclusions which a more cursory manner of observation had before induced him to adopt. Much valuable information has been thus obtained relative to the history of diseases, and of the origin and operation of agencies exerting a deleterious influence upon the public health and morals. We are met by peculiar difficulties in the application of statistics to the natural history and cure of insanity. Close and careful observation are essential to correct results, and in no department is such observation so difficult to be made. This arises from the peculiar characteristics of this protean disease; the difficulty of detecting, in many instances, the early symptoms; and the frequent unwillingness or inability of relations and friends to communicate a full history of those symptoms which are acknowledged to exist. Equally difficult is it to measure aright the force of the various moral and physical influences which have a bearing upon the case. These difficulties do not appear to be wholly insurmountable. Too little effort would seem to have been made to obtain exact expositions of

the variously combined causes; and the premonitory symptoms have not been watched by the professional and other friends, with that attention which is due to their important bearing upon the treatment and result of the case. It appears to me that these difficulties may, for the most part, be remedied; and that an approximation to the truth can be obtained, sufficiently near for many practical purposes, all of which may not yet be fully developed. The statements in regard to the curability of recent over old cases, though confessedly but approximations, have strongly impressed the public mind with the importance of early treatment; the results are seen in the increasing proportion of cases in the early stages of disease committed to our Lunatic Hospitals, and even where statistics fail to establish a principle, they may expose a fallacy.

A more careful observation of the causes, symptoms, &c., of this disease, with greater care and precision in collecting and analyzing them, the natural result of a correct appreciation of their importance, will render the statistics of insanity of greater value and trust-worthiness. It is certain that a sufficient opportunity of estimating their just merit has not been offered us. Their acknowledged value in other departments of medical science should render us cautious how we discard their assistance in this.

The extensive additions and improvements which have been completed within the last eighteen months have effected such a change, both in the external appearance and internal arrangements and accommodations of the Retreat, that it would be hardly recognized by those who have not watched from step to step their progress. They in fact constitute a new era in the history of the Institution. Its capacity for the accommodation of patients has been doubled, and the conveniences and appliances for successful treatment, as well as the arrangements for their more comfortable and pleasant classification, have increased in no less a ratio; and we are happy to believe that whatever doubt and misgiving may have been entertained in regard to the wisdom and necessity of these improvements when commenced, that the great advantages already realized, and the universal satisfaction expressed by patients and the friends and visitors of the Institution have satisfactorily proved their expediency and importance. Without them, indeed, not only must the officers of the Institution

have felt themselves limited in those architectural arrangements and domestic comforts necessary to the most successful treatment of its inmates, but the doors of the Institution must have been closed against many of those who needed its benefits.

Our means of classification have been greatly improved. This is one of those essential elements of moral treatment too often overlooked by the mere architect in the construction of Lunatic Hospitals. Without it the physician finds his way hedged up with difficulties and disappointments, and his wisest plans and purposes are liable to be defeated by a single artful and mischievous patient. Our present arrangements are most admirable—by them we are enabled to make eight distinct classes, and if necessary, subdivide even these, so that the social affinities of all may be consulted, and such influences associated as will have the most happy action and reaction upon each other. The cheerful and spacious dormitories give us sufficient room for the suicidal and timid, and their effect so far is happy, affording us great relief. The bath rooms, water closets, &c., are of easy access to each class, and are of the most recent and approved construction; the dining-rooms are handsome and convenient, and have a much more familiar and comfortable aspect than the former arrangement. A description of the new chapel, with an account of the interesting services of the dedication, as given in the city papers by a convalescent member of our family, may be found in the appendix. To the good taste and talents of the same gentleman we are also indebted, for the beautiful drawing of the Retreat which accompanies the Report.

In the construction, the furnishing, and the management of the Retreat, the great aim has been, on the one hand to avoid that extravagant expenditure which seeks to please and captivate the eye by unnecessary architectural and other display, and on the other hand, that penuriousness which sacrifices essentials to a false economy. Simplicity, neatness and efficiency of arrangement, with a rigid economy, pervade the establishment. Nothing is found for mere show—nothing essential is wanting. The great and prominent object of the Institution is never lost sight of—the restoration or amelioration of its inmates. In obtaining this end, that course would be disastrous which would enable us to afford board, nursing, medical

and other attendance, amusement, recreation, &c., at a less rate than board merely could be obtained by a sane man, in our immediate neighborhood. There is danger of erroneous views on this point obtaining temporary influence in the public mind.*

The amusements, exercises and employments of our household, which have been fully described in our preceding Reports are still continued, with such variations and additions as our experience and ingenuity can suggest. The benefits derived from them in improving the general health, exciting and fixing the attention, and in leading the faculties of the mind to healthy and vigorous action cannot be questioned. Labor upon the grounds in the garden, rides, walks, ninepins, visiting objects and places of interest in the city and vicinity, the sewing circle, dancing, musical and reading parties, various games, books, newspapers, periodical prints, &c., &c., are among the auxiliaries employed in our system of treatment.

During the winter, several concerts have been given by the patients, in which they were kindly assisted by several of our musical friends from the city. They were occasions of much interest, and are among the most pleasant recollections of our winter amusements.

We refer to extracts from letters B, &c., in the appendix, for pleasant illustrations of the above.

Besides our usual weekly sewing circle, a select party of the female patients have met with a few of our young ladies, friends from the city, who have instructed and assisted in the making of various fancy and other articles, which are offered for sale to visitors, and the proceeds expended in the purchase of books and other means of amusement. The effect of this has exceeded our expectations. A mutual interest in each others

Dr. Bell, in his Report upon the condition and management of the English, and other foreign Asylums for the Insane, remarks: "A principle every where recognized and declared as the practical fruit of much of the experience of those Institutions in Great Britain, which were brought into existence during the interest following the Parliamentary inquiry thirty years since is this, that there is no such thing as a just and proper curative or ameliorating treatment of the insane in cheaply constructed and cheaply managed institutions; that the measure of expense of common paupers never should be regarded, in providing for the Insane; that a better class of alms houses may be carried on for receiving lunatics, and dignified with the name of Asylums or Hospitals, with the same degree of apparent success, and that if it is worth while to have any institutions beyond these receptacles in which the most patients, or rather the most sufferers can be crowded together at the least charge, it is worth while to establish such as will accomplish all of cure or relief which is practicable. The general tone of feeling and action in England is such as to render it certain that the days of cheap provision for the insane had passed away after an experience of thirty years.

welfare has been excited, which has had a most happy and beneficial influence upon the ladies of our family, inspiring in them self-respect, and making them feel that their affliction brought not with it neglect.

To these ladies belong our most sincere acknowledgments, and the gratification of knowing that they have done good by inspiring hope, where there was despair; light, where there was darkness; and joy, where sadness reigned.

The library, besides periodicals, contains about 300 volumes, and is gradually increasing. The daily application for books is the best evidence of their utility.

The usual religious exercises of the chapel, evening prayers, and services on sabbath afternoon, have been continued. Familiarity with the services does not lessen their effect, nor diminish our estimation of the happy influences which result from the timely and judicious teachings of the chaplain. About ninety, or three fourths of our present number of patients, attend. With the officers, attendants and other members of our family they form an interesting and attentive congregation.

In August, Daniel Brooks, M. D., was appointed Assistant Physician. The ability and success with which he discharged similar duties (to those of his present office) during his former connection with the Retreat, we are confident will continue to distinguish him.

We offer our grateful thanks to George Brinley, Esq., of this city, for the kind interest he has in various ways evinced, in the welfare of our inmates.

Our obligations are due to the publishers of the New Haven Palladium, the Courant, and the Boston Olive Branch, for their liberality in furnishing us regularly with a copy of their respective publications.

I take pleasure in expressing to Mr. and Mrs. Cornish, the Steward and Matron, my sense of the value of their unwearied devotion to the best interests of the Institution; and to the attendants and assistants my thanks for the industry, vigilance and kindness they have shown, in the discharge of their responsible and often embarrassing duties.

Thus mercifully and propitiously has the year passed away, bringing its cares and anxieties, and leaving its rich rewards. We enter upon another, with an increased number of patients,

a broader field of effort, and an accumulating responsibility. Devoting our undivided energies to the trust committed to our care, and asking the continuance of the same cordial support and generous scrutiny and confidence of the Directors and the public, we leave the events with Him who governs all things in loving kindness and wisdom.

Respectfully submitted,

JOHN S. BUTLER.

Retreat for the Insane, }
Hartford, April, 1846. }

REPORT OF THE CHAPLAIN.

The past year has been signally marked by the increased facilities in the Retreat for carrying out the benevolent design with which it was founded. The erection of new buildings, and important improvements in the old, have added greatly to the comfort of the patients, and the means to be employed for their relief and cure.

Among these improvements, a very commodious and appropriate chapel occupies a prominent place. It bears witness to the regard which the Directors feel for the maintenance of religious worship and influence in the Institution committed to their care. It enables the Chaplain to conduct the religious exercises, on the Sabbath and other days of the week, under much more favorable circumstances than heretofore. A large proportion of the patients had been, for some time, looking forward to its completion with grateful anticipations, being fully able to appreciate its design, and susceptible of benefit from its privileges. Most of them attended its dedication, in January last, with deep interest at the time, and strong expressions of it afterwards. They continue to assemble in it, forming, with the officers, attendants, nurses, and other members of the family, a congregation of worshippers, whose orderly and devout deportment, often noticed and spoken of by occasional visitors, proves the inestimable value of religious exercises in such an establishment. Several of the patients belong to the choir of singers, and two or three of them have heightened the interest and effect of the music by instruments played with great taste and judgment. It is but due to the chorister and his associates to say, that this part of divine worship is conducted by them in a style of excellence, which those capable of appreciating it, often mention in terms of high commendation.

No one familiar with the internal management and concerns of the Retreat can hesitate, for a moment, to recognize the great benefit of these religious exercises to the patients.

Many of them, in a state of convalescence, have entirely recovered soundness of mind; and among these and the other patients are not a few who well know, by long experience, how to use and prize such privileges. Others are laboring under kinds and degrees of insanity which leave the mind rational with regard to a variety of subjects, religion often being one of them. Some are only periodically affected, and entirely sane during the intervals. Some have perverted moral feelings, obliquities of disposition and temper, while the intellect is capable, in a greater or less degree, of appreciating truth. Of the rest, there are those, indeed, whose minds are so enfeebled or beclouded by their malady, that they may not have any distinct conceptions of religious truth conveyed to them. Yet even these retain some childlike susceptibilities of religious feeling, not wholly inaccessible to the salutary impressions which the outward forms alone of divine worship are adapted to produce. Former associations and habits are not yet obliterated. They often give distinct and pleasant indications that the things of religion are among the few objects which still afford them some gratification; and small as may be the degree of enjoyment and benefit which they thus experience, christian sympathy delights to provide this solace for them, careful, in the spirit of the Saviour, *not to break the bruised reed, nor quench the smoking flax.*

In estimating the value of these religious exercises there are many things to be taken into account, in addition to their spiritual benefit to the patients, as *means of grace* that they ought to enjoy in common with their fellow-men around them,—and which things, in their aggregate influence, have a much greater efficiency than many, not familiar with them, would suppose. Such are the following: the necessary preparations to be made for attending the religious exercises in a becoming manner, and which fill up a portion of time agreeably and profitably; the regular return of the stated hour for doing this, and the pleasant anticipations connected with it; the change of scene from the apartments and halls to a commodious, cheerful, and tasteful chapel, there to unite in the worship of God; the social feelings induced and gratified; the

waking up of formerly cherished associations and habits ; the soothing, consoling, and elevating influence of sacred music ; the listening intelligently to the interesting truths of the Word of God, and uniting with the heart in rendering him that homage which is his just due, as is, beyond doubt, the case with regard to not a few of the patients ; the successful exercise of self-control, so strikingly and continually exhibited by those who need to exercise it ; the having *their own* place of worship, and *their own* minister whom they regard as the peculiar pastor of the little flock to which they belong ; the habits of punctuality, order, and decorum which they acquire and relish, in going to, and retiring from the accustomed place of their devotions, the two sexes having their separate avenues for entering and withdrawing, connected with the male and female sides of the Institution, and their appropriate, distinct seats while assembled together ; the feeling that, in all this, they are treated like other folks, and act as other folks do ; and the subsequent satisfaction, a part of our common nature, which many of them experience in the reflection that they have performed an important duty.

The Sabbath, it may be added, would be to many of the inmates of the Retreat a monotonous and tedious day, if it were not enlivened and cheered by their coming together for religious worship. This has often been noticed, and also that they manifest a strong and even restless desire to have the usual religious exercises return, when, as will sometimes happen from peculiar circumstances, they have been temporarily suspended.

These are considerations, to show the benefits of stated, religious exercises in establishments like the Retreat, confirmed by a careful observation and a long experience, and enforcing the duty of making the best provision for them.

During the past year, the chaplain has continued his daily, familiar intercourse with the patients, in accordance with the views and suggestions of the Physician, thus employing, together with other advantages, the most favorable means of addressing religious truth, motives, hopes, and consolations personally to many of them, in a way adapted to the peculiarities of each. He cannot but think, after nearly eight years of service in the Retreat, that an encouraging degree of success, under the divine blessing, attends this part of his labors.

Did time permit, he could go into a statement of individual cases, to show that this influence of religious truth and motives, in the way of personal intercourse, when wisely and seasonably employed, has exerted upon many of the patients a most salutary effect, while he cannot recall an instance of its having proved injurious. In some cases, the beneficial result is manifest at the time; in others, the influence, imperceptible at first, but lodged in the heart, has spontaneously put forth its power, and afforded its aid, when the efficacy of the medical means employed has begun to be felt, and convalescence, sometimes even a partial one, has given it opportunity to operate. For it is as true with regard to the moral, as to the intellectual and physical part of the constitution of man, that the most powerful agents are often those which, for a while, discover no efficiency, but, by a slow, hidden, and mysterious process, are gradually gathering strength, to be developed in due season. This feature of the efficacy of religious influence upon the insane mind, in making a just estimate of its value, has been greatly overlooked.

All this is frequently and abundantly confirmed by statements on the part of restored patients before leaving the Retreat, who speak, with gratitude, of the interest that they have felt in the religious exercises, and of the comfort and benefit that they have derived from them, and from the other means of religious counsel and consolation which they have enjoyed.

It is no valid objection to the use of this religious influence, that it does not reach all cases, and that in some it must, for a time, be dispensed with lest it may unduly excite, and injure. Medical, and what are termed moral means, do not always avail for the relief and cure of insanity. They have their limits and modifications. They must be suited to individual peculiarities, and even their use, in some cases, for a time, omitted. The most efficient remedies for any kind of evil, are usually those which require skill, care, and patience in using them, and to neglect them because this is necessary, is surely not the part of wisdom.

In the discharge of his various duties, the chaplain has endeavored to act, as it was intended he should, auxiliary to the Physician in the curative department; while he cannot but hope that, under the blessing of God, the religious exercises which he is called to conduct,—the officers, attendants, and

nurses being present at them, have contributed to lead all concerned in the internal management of the Retreat, to feel the force of the obligations resting upon them to be faithful in the performance of their respective duties, and in what they do, to cherish the spirit, and conform to the precepts of the Gospel of Jesus Christ.

Commending the Institution, once more, to the guidance, guardianship, and blessing of Almighty God, he concludes with expressing his sincere thanks to its officers, attendants, and other inmates for the uniform kindness and respect which they have showed him in the discharge of his duties.

T. H. GALLAUDET.

HARTFORD, May 8th, 1846.

APPENDIX.

DEDICATION OF THE CHAPEL OF THE RETREAT.

The very neat and comfortable room which has recently been finished, as the Chapel of the Retreat, was dedicated as a place of religious worship on Wednesday afternoon. The services on the occasion were very appropriate and interesting, and listened to by an attentive audience, composed of a large number of the patients and many of the friends and patrons of the Institution, with quite a large representation from the clergy and medical profession of the city. The introductory and consecrating prayer was made by the Rt. Rev. Dr. Brownell, which was followed by a very appropriate hymn, kindly written for the occasion, by Mrs. Sigourney, which, as many will be interested to see it, is by permission introduced here.

Father of all, who dost not scorn
Thy children, who in suffering pine;
E'en though the mystic links are torn,
That speech with reasoning thought combine:

We thank Thee, for the prompted spark
Of pity, in the Christian breast,
To melt the chains of anguish dark,
And give the unsheltered spirit rest.

That kindling still to purer fire,
And making bounties warm and free,
Hast bid this blessed dome aspire;
This new-born Chapel rise to Thee.

Here, deign to make the darkness, light,
The spirit's troubled wave, be still;
The mourner, in thy praise unite,
The drooping wanderer, learn thy will.

Here, let the Gospel's glorious sound,
The shipwrecked mind to hope restore;
The dead revive, the lost be found,
And every heart thy love adore.

The discourse of the Rev. Mr. Gallaudet, who, from the first appointment of a chaplain, has filled with so much success this interesting station, was exceedingly well timed, and presented a view of the gradual progress of the Institution, which must have been very gratifying to all its friends, and especially to those who have so faithfully stood by its interests, and carried forward, with so much enterprise and liberality, the recent extensive improvements which have so increased its capacity for usefulness, and the comfort of those who experience its many wise and kind provisions. He dwelt, with happy effect, upon the inde-

fatigable efforts of the founders and early friends of this benevolent enterprise, alluding particularly and somewhat at length to Dr. Todd, to whose distinguished abilities and character the Institution owed, in its first stages, and still owes so much; and to the satisfaction with which those who survive must now contrast the struggles and feebleness of its infancy with its present flourishing condition, and the wide-spreading usefulness to which, by the smiles of Providence, it has already attained; and while speaking of the pleasure thus afforded, to those who were interested and active in its foundation, alluded with great felicity of manner and expression to the Rev. Dr. Brownell and Dr. Robbins who were sitting on his right and left, who were associated with its earliest friends, and each of whom took part in the exercises of the occasion. His address was followed by a few remarks from the venerable Dr. Robbins and a very appropriate prayer, in which the future interests of this and the kindred Institution for the Deaf and Dumb were, with affectionate earnestness, commended to the great patron of every benevolent enterprise. The exercises were enlivened by appropriate music by the choir of the Retreat, composed principally of patients, and the whole occasion was one I believe of satisfactory interest to all.

It must indeed be a gratification to all those who have been interested in the welfare of this Institution, and so generously have carried forward the great improvements, of which this beautiful Chapel is the crowning enterprise, to see how much they have added to the comfort of its inmates, and the pleasing prospect of its increasing usefulness. This, and the kindred Institutions of the city, are certainly a practical commentary on the benevolent enterprise of its citizens, and the *State* may feel an honest pride in fostering them, as all can be assured that benefactions thus bestowed will result in constant and wide spreading good. And as one who can speak from experience of the excellencies of its arrangements and the kindness and fidelity of all to whose care its inmates are committed, I would say with heartfelt sincerity, long may it continue a refuge for the afflicted, and by the blessing of Providence on the labors of its able Superintendent and all the happy influences which it combines, send from its walls from time to time, many restored from the most painful of all afflictions to their "right mind," to revive the hopes of drooping affection, and send gladness to many a sad and desolate home.

LETTER A.

SEPTEMBER, 184

It is with much pleasure that I take my pen to address you in respect to my dear wife. She stood the journey remarkably well, and glad indeed was she once more to hail her home and friends, especially her little daughter. My wife appears as well as she ever did; she has a good appetite, sleeps well, and gains flesh every day. Were it not for the deep trial and anxiety through which we have passed, we should not, from any thing on her part, know any thing of the painful affliction through which she has passed. We are all now gathered in our little circle, and while I write she is singing like a lark. Happy are we, indeed, to have once more so dear a one to make her home happy, and to banish the desolation and loneliness that rested like an incubus on all our spirits in her absence. Much cause have we to be thankful to the God of all our mercies for the restoration to health of one of the best of wives, the kindest and loveliest of mothers, the choicest and most valued of friends. Nor shall we soon cease to remember you and the rest of those kind friends who have been instrumental, through the mercies of Israel's king, in bringing about so important and desirable a change. May Heaven shine propitiously on your arduous labors, and crown your efforts in behalf of suffering humanity with success. We have all been at my father's to spend the day, and it was a real old fashioned gathering I can assure you. There was no sighing, and anxious, painful longing for the dearest of our flock.

LETTER B.

Hartford, Sept.

Rather than address this leaf of my journal to that friend who first set me at the work of sketching, I will describe to my dear sister H, a little excursion which afforded me no small gratification.

You have heard of "Wadsworth's Tower," I think built by the same patriotic gentleman who contributed so largely to the erection of the splendid Athenæum, (which, indeed, bears his name,) one of the ornaments of this city of *good things*. It is well when wealth falls into the hands of men who delight in conferring happiness on the less favored world around them.

At eight o'clock, on a fine cool morning, we left home in two carriages, full of pleasurable anticipations, i. e., if I judge others by myself. The unexpected permission to make one of a select few for such a jaunt almost overset my newly learned quietness. I really wondered that my dish should happen to be "right side up" for this feast. You, my dear Sister, who know my ardent love for fine scenery, and for *high places*, can believe that some effort was necessary to behave with becoming *soberness*.

Leaving the city on our right, we passed through the pleasant village of West Hartford, smiling in all the beauties and treasures of early autumn; thence, over hill and dale, somewhat annoyed by clouds of dust but still enjoying the varied prospect, the cheerful chat, and occasionally when near enough to our fellow-travellers in the other carriage, a merry laugh at or with them. After rising gradually for a few miles we turned short to the right, through a gate labelled "Monte Video," from which the road ascended with little interruption, and was made entirely at the expense of the enterprising owner of the grounds. A farm house, occupied by people who attend to the grounds, is built in half gothic style, as are the barns, &c., quaint and suitable for so retired and romantic a spot. Farther up the charming glen is the former residence of Mr. W. Down a steep bank from this house is a cool spring, covered with a tasteful portico or rotunda; from this we had a refreshing draught in a broken pitcher. From this lofty and delightful garden I gathered a few flowers, and which I hope some day to see growing in my native valley. From the dwelling house our path was shaded by fruit and forest trees in irregular and pleasing variety, until we came to the steep and rugged ascent. With a rude staff I essayed this ascent, stopping now and then to pluck a wild flower; pausing for breath we toiled up the winding way, and reached the summit at eleven o'clock. I stood on the bank of the precipice and looked off, not as many hundred feet as at the Hawk's nest in Virginia, but quite a respectable height or depth. One more effort, rather trying to flesh and sinews, and I stood on the pinnacle of the Tower, and well was I repaid for all the fatigue and pain of climbing the dizzy height. Gazing in one direction and another, I thought of Natty Bumppo's description of the view from the Catskill;

"You look down on---Creation!"

LETTER C.

Retreat for the Insane, Feb.

I have a very pleasant room on the upper floor of the north wing. It is on the north-east corner of the building, and has two windows from which the view is very extensive. There are but five rooms on this floor, and at present they are occupied by the attendants, three other patients and myself. Mr. B— has been with us, but is now quite wild and has been removed to another part of the establishment. We are all so well that we are allowed to walk out without attendants, and have as much liberty as can be given us, consistently with the regulations of the house. Every thing is systematically arranged. I rise between six and seven, breakfast at a quarter past seven, dine at half past twelve, and take tea at half past five o'clock. I am allowed to take my meals in the dining room, on the first floor of the main building, in company with Mr. Cornish and his family, Dr. Brooks, the assistant physician, and from fifteen to twenty male and female patients. The table is always well supplied, and the food sufficiently varied, while at the same time it is regularly arranged and the same dishes always come on certain days. I am surprised to find our diet so little restricted, and do not venture to eat every thing that is set before me. Such things as nice pies, warm biscuit, cake, and such delicacies I find it most prudent to let alone, tempting as they all are.

I have medicine, (I don't know what,) three times a day, and take a pill at bed time. Mr. G. spends a considerable portion of every afternoon here, visiting the different halls, comes into our wing quite often, and is always very kind. He is truly a welcome visitor. The religious service is held at five o'clock in the after-

noon, and is attended by nearly all the inmates of the Retreat. The exercises consist in singing, reading a chapter, and prayer. The choir is partly composed of patients, and the whole service is conducted with as much decorum as any I ever attended. On the Sabbath we meet at three o'clock P. M., and the service is the same as at any of our churches. Our time between meals is passed off in various ways. We have a variety of games, cards, chequers, backgammon, morris, soletaire, &c. My chess men occupy us a good deal. Reading is also a resource with those who have eyes, but I cannot avail myself of this, to any extent. We have the use of a very good library of about 200 or 300 volumes. Riding and walking also help to pass away some time, while they afford the requisite exercise. The Retreat is warmed by furnaces, in which fires are kept constantly burning, so we do not feel the cold much, whatever the weather may be. So far as our bodily wants are concerned we are as well provided for as we can be. Dr. Butler, Mr. Cornish, and all around me, the attendants, family and patients, are very kind and friendly, and in that respect I have much to be thankful for.

C I R C U L A R .

The Relatives or Guardians, with the assistance of the Physician, are requested to annex, according to the best of their knowledge, precise answers to as many of the following queries as are applicable to the case of M—— and to transmit them immediately, by mail or otherwise, to the "Superintendent of the Retreat for the Insane" at Hartford, Conn.

Q U E R I E S .	A N S W E R S .
1. What is the age? and place of birth, and residence of the patient?	
2. Is the patient married, or single, or widowed? How long since first married or widowed? If patient has had children, state their number and the date of the birth of the last.	
3. What is the profession, or occupation and reputed pecuniary circumstances of the patient? If a female, state profession or occupation, &c., of father or husband.	
4. Is the patient a professor of religion? if so, of what denomination?	
5. What is the original disposition, and intellectual capacity of patient? Mention general habits of life, predominant passions or prejudices, and any habitual vice, or intemperance; does the patient use ardent spirits, opium, tobacco, &c.	
6. How long has the patient been insane? and did the disorder come on gradually or suddenly?	
7. Has the patient been insane previously? if so, specify the date, duration and form of each previous attack.	

QUERIES.

ANSWERS.

8. How long before accession of insanity were any such precursory symptoms observed as the following, viz., unusual depression or elevation of spirits, or any remarkable alteration in the temper, disposition, feelings, opinions, conduct, sleep, appetite, state of the bowels, or health of the patient? Previous to these symptoms, had the patient been remarkable for any degree of oddity, eccentricity, or mental infirmity?

9. What have been or are the prominent symptoms of the malady? Has any obvious change in its form occurred? Does it appear to be increasing, decreasing or stationary?

10. Are there lucid intervals or any great remissions or exacerbations, and do such changes occur at uncertain times, or at stated periods?

11. Does the patient rave indifferently on various subjects, or chiefly on one? and what is that subject? Mention particularly any permanent or remarkable illusions.

12. Has the patient ever threatened or attempted to commit suicide or any act of self-injury? and by what means? Is the propensity now active?

13. Does the patient manifest any disposition to injure other persons, and how? Or cherish any malicious design? Is the morbid train of thought excited by any particular subject or event?

14. Is the patient inclined to tear clothes, or to break windows or furniture?

15. Since the commencement of the insanity, what have been the patient's habits? State particularly whether the patient is attentive to the calls of nature?

16. What is supposed to have been the exciting cause of the insanity? Is it a moral cause, such as disappointment, fright, love, &c., or a physical cause, such as fever, the immoderate use of any intoxicating agents, bodily injury, serious illness, or accident affecting the nervous system, &c.

17. Does any constitutional or hereditary predisposition exist in the family of the patient to nervous affections? and was any relative of the patient ever insane?

QUERIES.

ANSWERS.

18. Was the head of the patient ever severely injured ?

19. Is the patient subject to periodical attacks of any other malady ; to any unusual discharge, or to suppression or obstruction of any customary discharge ; to sores, eruptions, rupture, epilepsy or palsy ? Specify any bodily infirmity or disease of the patient.

20. What has been done for the recovery of the patient ? and with what effect ? Mention particularly whether depletion by bloodletting, leeches, cathartics, low diet, &c., has been employed, and to what extent ?

21. Has the patient been subjected to any mechanical restraint ? if so, specify the length of time, and the manner in which the restraint was applied.

22. Has the patient ever been treated for insanity in this or any other asylum for the insane ? if so, how often, and how long on each occasion ? When, in what State, and if not cured, for what reason was the patient discharged ?

TERMS OF ADMISSION TO THE RETREAT.

- For patients belonging to this State,
with the usual accommodations, - \$3 00 per week.
- For those belonging to other States, - \$3 50 per week.
- For patients belonging to this State,
with accommodations in the cen-
tre building, and a
separate attendant, - - - \$10 00 per week.
- For those belonging to other States - \$12 00 per week.
- No patient to be admitted for a shorter term than three months, and payment for that term to be made in advance.
- For the admission of patients, apply to either of the Managers, or to the Superintendent.